

**IN THE UNITED STATES BANKRUPTCY COURT
FOR THE NORTHERN DISTRICT OF TEXAS
DALLAS DIVISION**

In re: FRESH ACQUISITIONS, LLC, <i>et al.</i> , ¹ Debtors.	§ § § § § § §	Chapter 11 Case No. 21-30721 (SGJ) (Jointly Administered)
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**GLOBAL NOTES AND STATEMENT OF LIMITATIONS, METHODOLOGIES,
AND DISCLAIMERS REGARDING THE DEBTORS' SCHEDULES
OF ASSETS AND LIABILITIES AND STATEMENTS OF FINANCIAL AFFAIRS**

The Schedules of Assets and Liabilities (collectively with attachments, the “Schedules”) and the Statements of Financial Affairs (collectively with attachments, the “Statements,” and together with the Schedules, the “Schedules and Statements”), filed by the above-captioned debtors and debtors in possession (collectively, the “Debtors”), were prepared pursuant to section 521 of title 11 of the United States Code (the “Bankruptcy Code”) and rule 1007 of the Federal Rules of Bankruptcy Procedure (the “Bankruptcy Rules”) by the Debtors’ management, with the assistance of the Debtors’ advisors, and are unaudited.

These Global Notes and Statement of Limitations, Methodologies, and Disclaimers Regarding the Debtors’ Schedules of Assets and Liabilities and Statements of Financial Affairs (the “Global Notes”) are incorporated by reference in, and comprise an integral part of, each Debtor’s respective Schedules and Statements, and should be referred to and considered in connection with any review of the Schedules and Statements.

While the Debtors’ management has made reasonable efforts to ensure that the Schedules and Statements are as accurate and complete as possible under the circumstances, based on information that was available at the time of preparation, inadvertent errors, inaccuracies, or omissions may have occurred or the Debtors may discover subsequent information that requires material changes to the Schedules and Statements. Because the Schedules and Statements contain unaudited information, which is subject to further review, verification, and potential adjustment, there can be no assurance that the Schedules and Statements are complete.

The Schedules and Statements have been signed by Mark Shapiro, Chief Restructuring Officer of the Debtors. Accordingly, in reviewing and signing the Schedules and Statements, Mr.

¹ The Debtors in these chapter 11 cases and the last four digits of each Debtor’s taxpayer identification number are as follows: Alamo Fresh Payroll, LLC (1590); Fresh Acquisitions, LLC (2795); Alamo Ovation, LLC (9002); Buffets LLC (2294); Hometown Buffet, Inc. (3002); Tahoe Joe’s Inc. (7129); OCB Restaurant Company, LLC (7607); OCB Purchasing, Co. (7610); Ryan’s Restaurant Group, LLC (7895); Fire Mountain Restaurants, LLC (8003); Food Management Partners, Inc. (7374); FMP SA Management Group, LLC (3031); FMP-Fresh Payroll, LLC (8962); FMP-Ovation Payroll, LLC (1728); and Alamo Buffets Payroll, LLC (0998). The Debtors’ principal offices are located at 2338 N. Loop 1604 W., Suite 350, San Antonio TX, 78248, United States.

Shapiro necessarily relied upon the efforts, statements, and representations of the Debtors' affiliated management companies, other personnel and advisors. Mr. Shapiro has not (and could not have) personally verified the accuracy of each such statement and representation, including, but not limited to, statements and representations concerning amounts owed to creditors, classification of such amounts, and respective creditor addresses.

The Global Notes supplement and are in addition to any specific notes contained in each Debtor's respective Schedules or Statements. Furthermore, the fact that the Debtors have prepared Global Notes or specific notes with respect to each of the individual Debtor's Schedules and Statements and not to those of another should not be interpreted as a decision by the Debtors to exclude the applicability of such Global Notes or specific notes to any of the Debtors' other Schedules and Statements, as appropriate.

Disclosure of information in one or more Schedules, one or more Statements, or one or more exhibits or attachments to the Schedules or Statements, even if incorrectly placed, shall be deemed to be disclosed in the correct Schedules, Statements, exhibits, or attachments.

1. **Description of Cases.** On April 20, 2021 (the "Petition Date"), the Debtors filed voluntary petitions for relief under chapter 11 of the Bankruptcy Code in the United States Bankruptcy Court for the Northern District of Texas (the "Bankruptcy Court"). The Debtors' chapter 11 cases are jointly administered for procedural purposes only under the lead case caption *In re Fresh Acquisitions, LLC, et al.*, Case No. 21-30721 (SGJ) (Bankr. N.D. Tex.) [Docket No. 53]. The Debtors are debtors in possession pursuant to sections 1107(a) and 1108 of the Bankruptcy Code. On April 30, 2021, the United States Trustee for the Northern District of Texas appointed a statutory committee of unsecured creditors pursuant to section 1102(a) and 1102(b)(1) of the Bankruptcy Code [Docket No. 94].
2. **"As Of" Information Date.** The information provided herein represents the data of the Debtors as of April 19, 2021, except for certain items which are as of mid-day on April 20, 2021 when the chapter 11 petitions were filed. Available cash is as of mid-day on April 20, 2021, and all other information including trade liabilities and principal and accrued interest on funded debt are provided as of April 19, 2021. Unless otherwise indicated herein or in the Schedules and Statements, the amounts set forth in the Schedules and Statements reflect net book value as of April 19, 2021. Amounts ultimately realized may vary from the values ascribed in the Schedules and Statements and such variance may be material. Accordingly, the Debtors reserve all of their rights to amend, modify or adjust the value of each asset set forth herein. In addition, the amounts shown for total liabilities exclude items identified as "unknown," "disputed," "contingent," "unliquidated," or "undetermined," and thus, ultimate liabilities may differ materially from those stated in the Schedules and Statements.
3. **General Reservation of Rights.** Reasonable efforts have been made to prepare and file complete and accurate Schedules and Statements; however, inadvertent errors or omissions may exist. The Debtors reserve all rights to amend or supplement the Schedules and Statements from time to time, in all respects, as may be necessary or appropriate, including: the right to amend the Schedules and Statements with respect to any claim (each a "Claim") description, designation, or Debtor against which the Claim is asserted; dispute or

otherwise assert offsets or defenses to any Claim reflected in the Schedules and Statements as to amount, liability, priority, status, or classification; subsequently designate any Claim as “disputed,” “contingent,” or “unliquidated;” or object to the extent, validity, enforceability, priority, or avoidability of any Claim. Any failure to designate a Claim in the Schedules and Statements as “disputed,” “contingent,” or “unliquidated” does not constitute an admission by the Debtors that such Claim or amount is not “disputed,” “contingent,” or “unliquidated.” Listing a Claim does not constitute an admission of (a) liability or (b) amounts due or owed, if any, by the Debtor against which the Claim is listed or against any of the Debtors. Furthermore, nothing contained in the Schedules and Statements shall constitute a waiver of rights with respect to these chapter 11 cases, including issues involving Claims, substantive consolidation, defenses, equitable subordination, or causes of action arising under the provisions of chapter 5 of the Bankruptcy Code or any other relevant nonbankruptcy laws to recover assets or avoid transfers. Any specific reservation of rights contained elsewhere in the Global Notes does not limit in any respect the general reservation of rights contained in this paragraph.

4. ***Basis of Presentation*** The Schedules and Statements do not purport to represent financial statements prepared in accordance with Generally Accepted Accounting Principles (“GAAP”), nor are they intended to fully reconcile to any financial statements prepared by any Debtor. Combining the assets and liabilities set forth in the Schedules and Statements would result in amounts that could be substantially different from financial information that would be prepared on a consolidated basis under GAAP. Unlike consolidated financial statements, the Schedules and Statements reflect the assets and liabilities of each separate Debtor, except where otherwise indicated. Information contained in the Schedules and Statements has been derived from the Debtors’ books and records. Moreover, given, among other things, the uncertainty surrounding the collection and ownership of certain assets and the valuation and nature of certain liabilities, to the extent that a Debtor shows more assets than liabilities, this is not an admission that the Debtor was solvent as of the Petition Date or at any time before the Petition Date. Likewise, to the extent a Debtor shows more liabilities than assets, this is not an admission that the Debtor was insolvent at the Petition Date or any time before the Petition Date.
5. ***Confidential or Sensitive Information.*** There may be instances in which certain information in the Schedules and Statements intentionally has been redacted due to, among other things, concerns for the privacy of an individual. In addition, the very existence of certain agreements is (by the terms of such agreements) confidential. These agreements have been noted, however, as “Confidential” in the Schedules and Statements, where applicable. The alterations or redactions are limited only to what the Debtors believe is necessary to protect the Debtor or the applicable third-party.
6. ***Causes of Action.*** Despite their reasonable efforts to identify all known assets, the Debtors may not have listed all of their causes of action or potential causes of action against third parties as assets in the Schedules and Statements. The Debtors reserve all of their rights with respect to any Claims or causes of action (including avoidance actions), controversy, right of setoff, cross claim, counterclaim, or recoupment and any claim on contracts or for breaches of duties imposed by law or in equity, demand, right, action, lien, indemnity, guaranty, suit, obligation, liability, damage, judgment, account, defense, power, privilege,

license, and franchise of any kind or character whatsoever, known, unknown, fixed or contingent, matured or unmatured, suspected or unsuspected, liquidated or unliquidated, disputed or undisputed, secured or unsecured, assertable directly or derivatively, whether arising before, on, or after the Petition Date, in contract or in tort, in law or in equity, or pursuant to any other theory of law (collectively, “Causes of Action”) they may have, and neither these Global Notes nor the Schedules and Statements shall be deemed a waiver of any Claims or Causes of Action or in any way prejudice or impair the assertion of such Claims or Causes of Action.

7. **Recharacterization.** The Debtors have made reasonable efforts to correctly characterize, classify, categorize, and designate the Claims, assets, executory contracts, unexpired leases, interests, and other items reported in the Schedules and Statements. Nevertheless, the Debtors may not have accurately characterized, classified, categorized, or designated certain items. The Debtors reserve all of their rights to recharacterize, reclassify, recategorize, or redesignate items reported in the Schedules and Statements at a later time as necessary or appropriate.
8. **Court Orders.** Pursuant to certain orders of the Bankruptcy Court entered in these chapter 11 cases (the “First Day Orders”), the Debtors were authorized (but not directed) to pay, among other things, certain prepetition Claims of employees, PACA and PASA trust claim holders, insurers, and taxing authorities. Accordingly, these liabilities may have been or may be satisfied in accordance with such orders and, therefore, generally are not listed in the Schedules and Statements. Regardless of whether such Claims are listed in the Schedules and Statements, to the extent such Claims are paid pursuant to an order of the Bankruptcy Court (including the First Day Orders), the Debtors reserve all rights to amend or supplement the Schedules and Statements as is necessary or appropriate, or to object or take other action as is necessary and appropriate to avoid over-payment of, or duplicate payments for, any such liabilities.
9. **Liabilities.** The Debtors have sought to allocate liabilities between the prepetition and postpetition periods based on the information and research that was conducted in connection with the preparation of the Schedules and Statements. As additional information becomes available and further research is conducted, the allocation of liabilities between prepetition and postpetition periods may change. The Debtors reserve the right to amend the Schedules and Statements as they deem appropriate in this regard.
10. **Excluded Assets and Liabilities.** The Debtors also have excluded rejection damage Claims of counterparties to executory contracts and unexpired leases that may be rejected (if any), to the extent such damage Claims exist. In addition, certain immaterial or *de minimis* assets and liabilities may have been excluded.
11. **Intellectual Property Rights.** Exclusion of certain intellectual property shall not be construed to be an admission that such intellectual property rights have been abandoned, have been terminated, otherwise have expired by their terms, or have been assigned or otherwise transferred pursuant to a sale, acquisition, or other transaction. Conversely, inclusion of certain intellectual property shall not be construed to be an admission that such

intellectual property rights have not been abandoned, have not been terminated, otherwise have not expired by their terms, or have not been assigned or otherwise.

12. ***Property and Equipment.*** Unless otherwise indicated, owned property (including real property) and equipment are stated at net book value. The Debtors may lease furniture, fixtures, and equipment from certain third-party lessors. Any such leases are set forth in the Schedules and Statements. Nothing in the Schedules and Statements is or shall be construed as an admission as to the determination as to the legal status of any lease (including whether any lease is a true lease or a financing arrangement), and the Debtors reserve all of their rights with respect thereto.
13. ***Intercompany Payables and Receivables.*** The listing by the Debtors of any account between a Debtor and another Debtor is a statement of what appears in a particular Debtor's books and records and does not reflect any admission or conclusion of the Debtors regarding the allowance, classification, characterization, validity, or priority of such account. The Debtors take no position in these Schedules and Statements as to whether such accounts would be collectible, or allowed as a Claim, an Interest, or not allowed at all. The Debtors and all parties in interest reserve all rights with respect to such accounts.
14. ***Estimates.*** To prepare and file the Schedules and Statements in accordance with the deadline established in these chapter 11 cases, management was required to make certain estimates and assumptions that affected the reported amounts of these assets and liabilities. The Debtors reserve all rights to amend the reported amounts of assets and liabilities to reflect changes in those estimates or assumptions.
15. ***Fiscal Year.*** Each Debtor's most recent fiscal year ended on December 30, 2020.
16. ***Currency.*** All amounts are reflected in U.S. dollars.
17. ***Executory Contracts.*** Although the Debtors are making diligent attempts to properly identify the Debtor counterparty(ies) to each executory contract on Schedule G, it is possible that more Debtor entities are a counterparty to certain executory contracts on Schedule G than will be listed. The Debtors reserve all of their rights with respect to the named parties of any and all executory contracts, including the right to amend Schedule G. In addition, although the Debtors have made diligent attempts to properly identify executory contracts and unexpired leases, the inclusion of a contract or lease on Schedule G does not constitute an admission as to the executory or unexpired nature (or non-executory or expired nature) of the contract or lease, or an admission as to the existence or validity of any Claims held by the any counterparty to such contract or lease. Furthermore, while the Debtors have made diligent attempts to properly identify all executory contracts and unexpired leases, inadvertent errors, omissions, or over inclusion may have occurred.
18. ***Leases.*** The Debtors have not included the future obligations of any capital or operating leases in the Schedules and Statements. To the extent that there was an amount outstanding as of the Petition Date, the creditor will be included on Schedule E/F of the Schedules.
19. ***Insiders.*** The Debtors have attempted to include all payments made on or within 12 months before the Petition Date to any individual or entity deemed an "insider."

The listing or omission of a party as an insider for purposes of the Schedules and Statements is for informational purposes and is not intended to be, nor should it be, construed as an admission that those parties are or are not insiders for purpose of section 101(31) of the Bankruptcy Code.

Furthermore, certain of the individuals or entities identified as insiders may not have been insiders for the entirety of the 12-month period, but the Debtors have included them herein out of an abundance of caution. The Debtors reserve all rights with respect thereto.

20. **Totals.** All totals that are included in the Schedules and Statements represent totals of all known amounts included in the Schedules and Statements. To the extent there are unknown, disputed, contingent, unliquidated, or otherwise undetermined amounts, the actual total may be different than the listed total.
21. **Unliquidated Claim Amounts.** Claim amounts that could not be quantified by the Debtors are scheduled as “unliquidated.”
22. **Undetermined Amounts.** The description of an amount as “unknown,” “disputed,” “contingent,” “unliquidated,” or “undetermined” is not intended to reflect upon the materiality of such amount.
23. **Credits and Adjustments.** The claims of individual creditors for, among other things, goods, products or services are listed as amounts entered on the Debtors’ books and records and may not reflect credits, allowances or other adjustments due from such creditors to the Debtors. The Debtors reserve all of their rights respecting such credits, allowances and other adjustments.
24. **Payments.** Prior to the Petition Date, the Debtors maintained a cash management and disbursement system in the ordinary course of their businesses (the “Cash Management System”) (as more fully described in the *Debtors’ Emergency Motion for Entry of an Order (I) Authorizing the Debtors to Continue to Operate Their Cash Management System and Perform Intercompany Transactions, and (II) Granting Related Relief* (the “Cash Management Motion”) [Docket No. 8]). Although efforts have been made to attribute open payable amounts to the correct legal entity, the Debtors reserve the right to modify or amend their Schedules and Statements to attribute any payments to a different legal entity, if appropriate.
25. **Guaranties and Other Secondary Liability Claims.** The Debtors have used their best efforts to locate and identify guaranties and other secondary liability claims (collectively, the “Guaranties”) in their executory contracts, unexpired leases, debt instruments, and other such agreements; however, a review of these agreements, specifically the Debtors’ leases and contracts, is ongoing. Where such Guaranties have been identified, they have been included in the relevant Schedule for the Debtor or Debtors affected by such Guaranties. The Debtors have reflected the Guaranty obligations for both the primary obligor and the guarantor with respect to their financings and debt instruments on Schedules G and H. The Debtors believe that certain Guaranties embedded in the Debtors’ executory contracts, unexpired leases, other secured financing, debt instruments, and

similar agreements may exist and, to the extent they do, will be identified upon further review. Therefore, the Debtors reserve their rights to amend the Schedules to the extent additional Guaranties are identified.

26. ***Consolidated Identification of Interests.*** As set forth above, the Schedules and Statements, in certain instances, call for information that, if provided, would disclose the identities and personal contact information of certain individuals. The Debtors have elected to present such sensitive information as consolidated line items of similar interests. The Debtors believe that producing information in this manner is necessary to both maintain valuable customer and vendor relationships and to protect the Debtors' propriety information.
27. ***Mechanics' Liens.*** The property and equipment listed in the Schedules are presented without consideration of any mechanics', materialmans', or other similar statutory liens. Such liens may apply, and the Debtors reserve their right to dispute or challenge the validity, perfection, or immunity from avoidance of any lien purported to be perfected by a creditor.
28. ***Global Notes Control.*** In the event that the Schedules and Statements differ from the Global Notes, the Global Notes shall control.
29. ***Entity Classification Issues.*** The Debtors have used their best efforts to identify the assets owned by each Debtor, the liabilities owed by each Debtor, and the Debtor that is a counterparty to executory contracts and unexpired leases; however, there are certain inherent limitations in making such identifications, including, but not limited to the facts that: (a) certain assets and executory contracts and unexpired leases may be primarily used by a Debtor other than the entity which holds title to such assets or is a party to such executory contact and unexpired lease according to the Debtors' books and records; (b) the Debtor entity that owns or holds title to certain assets or is a party to certain executory contracts and unexpired leases may not be ascertainable given the consolidated manner in which the Debtors have operated their businesses; (c) certain liabilities may have been nominally incurred by one Debtor, yet such liabilities may have actually been incurred by, or the invoices related to such liabilities may have been issued to or in the name of, another Debtor; and (d) certain creditors of the Debtors may have treated one or more of the Debtors as a consolidated entity rather than as differentiated entities. In addition, financial activity for the Debtors is generally recorded under Debtor Buffets LLC for the Old Country Buffet®, Country Buffet®, HomeTown® Buffet, Ryan's®, and Fire Mountain® segments of their businesses.

Specific Disclosures with Respect to the Debtors' Schedules

30. ***Schedule A/B.*** Real property is reported at book value. The Debtors may have listed certain assets as real property when such assets are in fact personal property, or the Debtors may have listed certain assets as personal property when such assets are in fact real property. The Debtors reserve all of their rights to recategorize or recharacterize such asset holdings to the extent the Debtors determine that such holdings were listed incorrectly.

Certain of the instruments reflected on Schedule A may contain renewal options, guarantees of payments, and other miscellaneous rights. Such rights, powers, duties, and obligations are not separately set forth on Schedule A. The Debtors hereby expressly reserve the right to assert that any instrument listed on Schedule A is an executory contract within the meaning of section 365 of the Bankruptcy Code. The Debtors reserve all of their rights, claims, and causes of action with respect to claims associated with any contracts and agreements listed on Schedule A or Schedule G, including their right to dispute or challenge the characterization or the structure of any transaction, document, or instrument (including any intercompany agreement) related to a creditors' claim.

The Debtors' failure to list any rights in real property on Schedule A/B should not be construed as a waiver of any such rights that may exist, whether known or unknown at this time.

31. ***Schedule A/B 3.*** Amounts listed reflect the bank balance not the net book value. Bank account balances listed in Part 1 represent the balance as of April 20, 2021 prior to filing.
32. ***Schedule A/B 7.*** The Debtors are required to make deposits from time to time with various vendors, landlords, and service providers in the ordinary course of business. The Debtors have exercised reasonable efforts to report the current value of any deposits. The Debtors may have inadvertently omitted deposits and conversely may have reported deposits that are no longer outstanding. The Debtors reserve their rights, but are not required, to amend the Schedules and Statements if deposits are incorrectly identified.
33. ***Schedule A/B 8.*** The Debtors are required to make prepayments from time to time with various vendors, landlords, and service providers in the ordinary course of business. The Debtors have exercised reasonable efforts to identify any prepayments. The Debtors may have inadvertently omitted certain prepayments and conversely may have reported prepayments for which services have already been provided. The Debtors reserve their rights, but undertake no obligation to, to amend the Schedules and Statements if prepayments are incorrectly identified.
34. ***Schedule A/B 38–53.*** All furniture and equipment owned as of the Petition Date may not be listed. Certain kitchen equipment, such as ovens and mixers, and used furniture of inconsequential value, or that would require a cost to remove and store exceeding the benefit of retaining such property, has been abandoned pursuant to the various lease rejection motions filed in these chapter 11 cases. Dollar amounts for furniture, fixtures, and equipment are presented net of accumulated depreciation and other adjustments, except for certain locations where the Debtors planned to abandon items of *de minimis* value to the landlord. Because of the large number of items comprising the Debtors' furniture, fixtures, and equipment, as well as the difficulty of listing out every one of these assets, these items are listed as group line items. The Debtors may lease furniture, fixtures, and equipment from certain third-party lessors. Any such leases are set forth in the Schedules and Statements. Nothing in the Schedules and Statements is or shall be construed to be an admission regarding the legal status of any lease (including whether any lease is a true lease or a financing arrangement), and the Debtors reserve all of their rights with respect to same.

35. **Schedule A/B 59** The Debtors report intellectual property assets as net book value based on the Debtors' books and records whenever applicable. Values are listed as unknown or undetermined where appropriate. Additionally, the Debtors maintain certain customer lists and information in conjunction with the operation of their Customer Programs as defined in the *Debtors' Emergency Motion for Entry of Interim and Final Orders (A) Authorizing the Debtors to Maintain and Administer Their Existing Customer Programs and Honor Certain Prepetition Obligations Related Thereto and (B) Granting Related Relief* [Docket No. 10].
36. **Schedule A/B 73** The Debtors maintain a variety of insurance policies including property, general liability, and workers' compensation policies and other employee related policies. A list of the Debtors insurance policies and related information is available in the *Debtors' Emergency Motion for Entry of an Order (I) Authorizing the Debtors to (A) Continue their Insurance Policies and Honor all Obligations in Respect Thereof, and (B) Renew, Supplement, and Enter Into New Insurance Policies, and (II) Granting Related Relief* [Docket No. 13]. The Debtors believe that there is little or no cash value to the vast majority of such insurance policies. Such policies are listed on Schedule A/B, Part 11 but have no value ascribed to them.
37. **Schedule A/B 75.** In the ordinary course of business, the Debtors may have accrued, or may subsequently accrue, certain rights to counterclaims, crossclaims, setoffs, refunds with their customers and suppliers, or potential warranty claims against their suppliers. Additionally, certain of the Debtors may be party to pending litigation in which the Debtors have asserted, or may assert, claims as a plaintiff or counterclaims and/or crossclaims as a defendant. Because certain of these claims are unknown to the Debtors and not quantifiable as of the Petition Date, they may not be listed on Schedule A/B, Part 11.
38. **Schedule D.** Except as otherwise agreed pursuant to a stipulation, or agreed order, or general order entered by the Bankruptcy Court that is or becomes final, the Debtors and their estates reserve their rights to dispute or challenge the validity, perfection, or immunity from avoidance of any lien purported to be granted or perfected in any specific asset to a creditor listed on Schedule D of any Debtor. Moreover, although the Debtors may have scheduled claims of various creditors as secured claims, the Debtors reserve all rights to dispute or challenge the secured nature of any such creditor's claim or the characterization of the structure of any such transaction or any document or instrument related to such creditor's claim. Further, while the Debtors have included the results of Uniform Commercial Code searches, the listing of such results is not nor shall it be deemed an admission as to the validity of any such lien. Conversely, the Debtors made reasonable, good faith efforts to include all liens on Schedule D, but may have inadvertently omitted an existing lien because of, among other things, the possibility that a lien may have been imposed after the Uniform Commercial Code searches were performed or a vendor may not have filed the requisite perfection documentation. Moreover, the Debtors have not included on Schedule D parties that may believe their Claims are secured through setoff rights or inchoate statutory lien rights.

The amounts reflected outstanding under the Debtors' prepetition funded indebtedness reflect approximate principal and accrued interest as of the Petition Date.

Schedule D does not include parties who have filed notices of perfection of liens pursuant to section 546(b) of the Bankruptcy Code.

In certain instances, a Debtor may be a co-obligor, or guarantor with respect to scheduled claims of another Debtor, however no claim set forth on Scheduled D of any Debtor is intended to acknowledge claims of creditors that are otherwise satisfied or discharged by other entities. The descriptions provided in Schedule D are intended only as a summary. Reference to the applicable loan agreements and related documents is necessary for a complete description of the collateral and the nature, extent, and priority of any liens. Nothing in the Global Notes or the Schedules and Statements shall be deemed a modification or interpretation of the terms of such agreements.

39. ***Schedule E/F, Part 1: Creditors Holding Priority Unsecured Claims.*** The listing of any claim on Schedule E/F, Part 1 does not constitute an admission by the Debtors that such claim is entitled to priority treatment under section 507 of the Bankruptcy Code. The Debtors reserve all of their rights to dispute the amount and the priority status of any claim on any basis at any time. All claims listed on the Debtors' Schedule E/F are claims arising from tax, wage, or wage-related obligations to which the Debtors may potentially be liable. Certain of such claims, however, may be subject to ongoing audits and the Debtors are otherwise unable to determine with certainty the amount of many, if not all, of the remaining claims listed on Schedule E/F. Accordingly, the Debtors have listed all such claims as unknown in amount, pending final resolution of ongoing audits or other outstanding issues. Additionally, as more fully set forth in the *Debtors' Emergency Motion for Entry of an Order (I) Authorizing the Debtors to (A) Pay Prepetition Wages, Salaries, Other Compensation, and Reimbursable Expenses and (B) Continue Employee Benefits Programs and (II) Granting Related Relief* [Docket No. 14], claims against the Debtors on account of wage or wage-related obligations may maintain priority under section 507 of the Bankruptcy Code, but are subject to the priority cap imposed under subsections (a)(4) and (a)(5) of section 507 of the Bankruptcy Code. Further, to the extent such claims have been paid or may be paid pursuant to a court order, they may not be included on Schedule E.
40. ***Schedule E/F, Part 2: Creditors Holding Non-Priority Unsecured Claims.***

The Debtors have used their reasonable best efforts to list all general unsecured claims against the Debtors on Schedule E/F based upon the Debtors' existing books and records.

The Debtors have attempted to relate all liabilities to each particular Debtor. Certain creditors listed on Schedule E/F may owe amounts to the Debtors and, as such, the Debtors may have valid setoff or recoupment rights with respect to such amounts. The amounts listed on Schedule E/F do not reflect any such right of setoff or recoupment and the Debtors reserve all rights to assert any such setoff or recoupment rights. Additionally, certain creditors may assert mechanics', materialmans', or other similar liens against the Debtors for amounts listed on Schedule E/F. The Debtors reserve their right to dispute or challenge the validity, perfection, or immunity from avoidance of any lien purported to be perfected by a creditor listed on Schedule E/F of any Debtor.

Schedule E/F does not include certain deferred credits, deferred charges, deferred liabilities, accruals, or general reserves. Such amounts are general estimates of liabilities and do not represent specific claims as of the Petition Date.

Schedule E/F does not include certain reserves for potential unliquidated contingencies that historically were carried on the Debtors' books as of the Petition Date; such reserves were for potential liabilities only and do not represent actual liabilities as of the Petition Date.

The claims listed in Schedule E/F arose or were incurred on various dates. In certain instances, the date on which a claim arose is an open issue of fact. Determining the date upon which each claim in Schedule E/F was incurred or arose would be unduly burdensome and cost prohibitive and, therefore, the Debtors do not list a date for each claim listed on Schedule E/F.

Schedule E/F contains information regarding pending litigation involving the Debtors. In certain instances, the Debtor or related co-defendants that are the subject of the litigation may be unclear or undetermined. To the extent that litigation involving a particular Debtor or related co-defendant has been identified, such information is contained in the Schedule for that Debtor. Additionally, to the extent the identification of contingent co-defendants is unknown or unclear, the Debtors have listed only the underlying litigation. The amounts for these potential claims are listed as unknown and marked as contingent, unliquidated, and disputed in the Schedules.

Schedule E/F reflects the prepetition amounts owing to counterparties to executory contracts and unexpired leases. Such prepetition amounts, however, may be paid in whole or in part in connection with the assumption, or assumption and assignment, of an executory contract or unexpired lease. In addition, Schedule E/F does not include rejection damage claims of the counterparties to the executory contracts or unexpired leases that have been or may be rejected, to the extent such damage claims exist.

Schedule E/F, Part 2 also contains memo entries for former employees who are owed prepetition paid time off. These former employees are not scheduled individually in order to protect personal information; however, each former employee will receive information about their scheduled claim and have the opportunity to file a proof of claim.

The Debtors have made reasonable efforts to locate and identify Guaranties in each of the executory contracts, unexpired leases, secured financings, debt instruments and other such agreements to which any Debtor is a party. Where Guaranties have been identified, they have been included in the relevant Schedules for the Debtor or Debtors affected by such Guaranties as a contingent and unliquidated obligation. The Debtors have placed the Guaranties on Schedule H for both the primary obligor and the guarantor of the relevant obligation. Guaranties were additionally placed on Schedule D or F for each guarantor, except to the extent they are associated with obligations under an executory contract or unexpired lease identified on Schedule G. It is possible that certain Guaranties embedded in the Debtors' executory contracts, unexpired leases, secured financings, debt instruments and other such agreements may have been inadvertently omitted. The Debtors reserve their rights to amend the Schedules to the extent additional Guaranties are identified or such

Guaranties are discovered to have expired or be unenforceable. In addition, the Debtors reserve the right to amend the Schedules and SOFAs and to re-characterize or reclassify any such contract or claim, whether by amending the Schedules and SOFAs or in another appropriate filing. Additionally, failure to list any Guaranties in the Schedules and SOFAs, including in any future amendments to the Schedules and SOFAs, shall not affect the enforceability of any Guaranties not listed.

In addition, certain claims listed on Schedule E/F may be entitled to priority under section 503(b)(9) of the Bankruptcy Code.

41. ***Schedule G.*** While the Debtors' existing books, records, and financial systems have been relied upon to identify and schedule executory contracts at each of the Debtors, and although reasonable efforts have been made to ensure the accuracy of Schedule G, inadvertent errors, omissions, or inclusions may have occurred. The Debtors do not make, and specifically disclaim, any representation or warranty as to the completeness or accuracy of the information set forth on Schedule G. The Debtors hereby reserve all of their rights to dispute the validity, status, or enforceability of any contract, agreement, or lease set forth in Schedule G and to amend or supplement Schedule G as necessary. The contracts, agreements, and leases listed on Schedule G may have expired or may have been modified, amended, or supplemented from time to time by various amendments, restatements, waivers, estoppel certificates, letters, memoranda, and other documents, instruments, and agreements that may not be listed therein despite the Debtors' use of reasonable efforts to identify such documents. Further, unless otherwise specified on Schedule G, each executory contract or unexpired lease listed thereon shall include all exhibits, schedules, riders, modifications, declarations, amendments, supplements, attachments, restatements, or other agreements made directly or indirectly by any agreement, instrument, or other document that in any manner affects such executory contract or unexpired lease, without respect to whether such agreement, instrument, or other document is listed thereon.

In some cases, the same supplier or provider appears multiple times in Schedule G. This multiple listing is intended to reflect distinct agreements between the applicable Debtor and such supplier or provider.

In the ordinary course of business, the Debtors may have issued numerous purchase orders for goods, supplies, products, services, and related items which, to the extent that such purchase orders constitute executory contracts, are not listed individually on Schedule G. To the extent that goods, supplies, or products were delivered, or services performed under purchase orders before the Petition Date, vendors' claims with respect to such delivered goods, supplies, or product and performed services are included on Schedule E/F.

As a general matter, certain of the Debtors' executory contracts and unexpired leases could be included in more than one category. In those instances, one category has been chosen to avoid duplication. Further, the designation of a category is not meant to be wholly inclusive or descriptive of the entirety of the rights or obligations represented by such contract.

Certain of the executory contracts and unexpired leases listed on Schedule G may contain certain renewal options, guarantees of payment, right to lease additional space, and other miscellaneous rights. Such rights, powers, duties, and obligations are not set forth separately on Schedule G. In addition, the Debtors may have entered into various other types of agreements in the ordinary course of their business, such as easements, rights of way, subordination, non-disturbance, and attornment agreements, supplemental agreements, amendments/letter agreements, title agreements, and division order agreements. Such documents also are not set forth in Schedule G.

The Debtors hereby reserve all of their rights, claims, and causes of action with respect to the contracts and agreements listed on Schedule G, including the right to dispute or challenge the characterization or the structure of any transaction, document, or instrument related to a creditor's claim, to dispute the validity, status, or enforceability of any contract, agreement, or lease set forth in Schedule G, and to amend or supplement Schedule G as necessary. The inclusion of a contract or lease on Schedule G does not constitute an admission as to the executory or unexpired nature (or non-executory or expired nature) of the contract or lease, or an admission as to the existence or validity of any Claims held by the counterparty to such contract or lease, and the Debtors reserve all rights in that regard, including, without limitation, that any agreement is not executory, has expired pursuant to its terms, or was terminated prepetition.

Certain of the executory contracts and unexpired leases listed in Schedule G may have been assigned to, assumed by, or otherwise transferred to certain of the Debtors in connection with, among other things, acquisitions by the Debtors. The Debtors have attempted to list the appropriate Debtor parties to each contract, agreement, and lease on Schedule G; however, there may be instances in which other Debtor entities that are not parties to the contracts, agreements, and leases have been the primary entities conducting business in connection with these contracts, agreements, and leases. Accordingly, the Debtors have listed certain contracts, agreements, and leases on Schedule G of the Debtor entity corresponding to the applicable contracting entity which may, upon further review, differ from the primary entity conducting business with the counterparty to that particular contract, agreement, or lease. In instances where the Debtors were unable to determine which Debtor is the party to a contract, agreement, or lease, the Debtors have listed such contracts, agreements, or leases on Schedule G for Debtor Fresh Acquisitions, LLC.

In the ordinary course of business, the Debtors may have entered into confidentiality agreements which, to the extent that such confidentiality agreements constitute executory contracts, are not listed individually on Schedule G.

In addition, Schedule G does not include rejection damage claims of the counterparties to the executory contracts and unexpired leases that have been or may be rejected, to the extent such damage claims exist.

42. ***Schedule H.*** The Debtors have not listed any litigation-related to co-Debtors on Schedule H. Instead, such listings can be found on the Debtors' Schedules E/F.

Specific Disclosures with Respect to the Debtors' Statements

43. **Statement 3.** Statement 3 includes any disbursement or other transfer made by a Debtor where the aggregate transfers exceed \$6,825, except for regular employee compensation and those made to insiders, which are reflected on Statements 4 and 30

44. **Statement 4.** "Intercompany payments" mean payments made among or between debtors or their non-debtor affiliates as short term non-interest bearing loans, repayment of such loans, or management fees paid pursuant to management agreements.

Payments made by the Debtors to GlassRatner Advisory & Capital Group LLC d/b/a B. Riley Advisory Services have not been listed in response to Question 4; such payments made by the Debtors to B. Riley have been listed in response to Question 11.

45. **Statement 7.** The Debtors have identified "Case Title," in some instances, by the applicable plaintiff's name. The Debtors used reasonable efforts to identify all pending litigation and assign appropriate descriptions thereto. In the event that the Debtors discover additional information pertaining to these legal actions identified in response to Question 7, or additional legal actions, the Debtors will use reasonable efforts to supplement the Statements in light thereof.

The Debtors reserve all of their rights and defenses with respect to any and all listed lawsuits and administrative proceedings. The listing of such suits and proceedings shall not constitute an admission by the Debtors of any liabilities or that the actions or proceedings were correctly filed against the Debtors or any affiliates of the Debtors. The Debtors also reserve their rights to assert that neither the Debtors nor any affiliate of the Debtors is an appropriate party to such actions or proceedings.

46. **Statement 11.** The Debtors have used reasonable efforts to identify payments for services of any entities that provided consultation concerning debt counseling or restructuring services, relief under the Bankruptcy Code, or preparation of a petition in bankruptcy within one year immediately preceding the Petition Date. Additional information regarding the Debtors' retention of professional service firms is more fully described in the individual retention applications for those firms and related orders.

47. **Statement 13** – As a result of the COVID-19 pandemic, most of the Debtors' buffet format restaurants were permanently closed. As a part of each restaurant closing, the equipment, furniture, and fixtures located in the restaurants were either abandoned to the landlord or auctioned by a third party. In the cases where there were proceeds remaining for the Debtor after deducting auction expenses, they were typically less than \$20,000 per restaurant.

48. **Statement 14** - To the extent that the Debtors vacated store locations during the three years immediately preceding the commencement date, information on these former store locations is contained in the Debtors' response to Question 14.

49. **Statement 26(d).** From time to time, the Debtors provided financial statements in the ordinary course of business to numerous parties for business, statutory, credit, financing and other reasons. Recipients have included regulatory agencies, financial institutions,

investment banks, vendors, landlords, debtholders and their legal and financial advisors. Due to the confidentiality requirements of related non-disclosure agreements, and because detailed records identifying all parties that have received such statements were not maintained by the Debtors, such parties are not listed in response to this question.

50. **Statement 27.** The Debtors' employees perform weekly physical inventory counts in the ordinary course of business. To the extent a location was closed, the inventory shown is \$0.
51. **Statement 30.** The Debtors have included responses to Question 30 in Question 4.

Fill in this information to identify the case:

Debtor name Buffets LLC (aka Ovation Brands)

United States Bankruptcy Court for the: Northern District of Texas
(State)

Case number (If known): 21-30723-SGJ

☐ Check if this is an amended filing

Official Form 206Sum**Summary of Assets and Liabilities for Non-Individuals**

12/15

Part 1: Summary of Assets**1. Schedule A/B: Assets—Real and Personal Property** (Official Form 206A/B)

1a. Real property: Copy line 88 from <i>Schedule A/B</i>	\$ Unknown
1b. Total personal property: Copy line 91A from <i>Schedule A/B</i>	\$ 86,736.45 Plus Unknown
1c. Total of all property: Copy line 92 from <i>Schedule A/B</i>	\$ 86,736.45 Plus Unknown

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i>	\$ 500,000.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)	
3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i>	\$ 2,397,507.00
3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i>	+ \$ 22,268,291.88 Plus Unknown
4. Total liabilities Lines 2 + 3a + 3b	\$ 25,165,798.88 Plus Unknown

Fill in this information to identify the case:Debtor name Buffets LLC (aka Ovation Brands)United States Bankruptcy Court for the: Northern District of Texas
(State)Case number (If known): 21-30723-SGJ☐ Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets — Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.
☒ Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor**Current value of debtor's interest****2. Cash on hand**

\$ 0.00

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	
3.1 Arizona Bank & Trust	Concentration Account	2555	\$17,791.54
3.2 Arizona Bank & Trust	Disbursement Account	2560	\$0.00
3.3 Arizona Bank & Trust	Elavon Merch Account	2198	\$0.00
3.4 Arizona Bank & Trust	Merchant Deposit	2584	\$0.00
3.5 Arizona Bank & Trust	Utility	3927	\$0.00

4. Other cash equivalents (Identify all)**5. Total of Part 1**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$17,791.54

Part 2: Deposits and prepayments**6. Does the debtor have any deposits or prepayments?**

- ☐ No. Go to Part 3.
☒ Yes. Fill in the information below.

Current value of debtor's**7. Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit	
7.1 Gray Reed & McGraw LLP - retainer	\$7,278.24
7.2 B. Riley Advisory Services - retainer	\$6,666.67

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

unknown

Add lines 7 through 8. Copy the total to line 81.

Debtor Buffets LLC (aka Ovation Brands)
NameCase number (if known) 21-30723-SGJ

- ☒ No. Go to Part 6.
- ☐ Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19. Raw materials				
	MM / DD / YYYY			
20. Work in progress				
	MM / DD / YYYY			
21. Finished goods, including goods held for resale				
	MM / DD / YYYY			
22. Other inventory or supplies				
	MM / DD / YYYY			
23. Total of Part 5				
Add lines 19 through 22. Copy the total to line 84.				
24. Is any of the property listed in Part 5 perishable?				
<input type="checkbox"/> No				
<input type="checkbox"/> Yes				
25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?				
<input type="checkbox"/> No				
<input type="checkbox"/> Yes. Book value _____ Valuation method ____ Current value ____				
26. Has any of the property listed in Part 5 been appraised by a professional within the last year?				
<input type="checkbox"/> No				
<input type="checkbox"/> Yes				

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.
- ☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
28. Crops—either planted or harvested			
29. Farm animals <i>Examples:</i> Livestock, poultry, farm-raised fish			
30. Farm machinery and equipment (Other than titled motor vehicles)			
31. Farm and fishing supplies, chemicals, and feed			
32. Other farming and fishing-related property not already listed in Part 6			
33. Total of Part 6			
Add lines 28 through 32. Copy the total to line 85.			
34. Is the debtor a member of an agricultural cooperative?			
<input type="checkbox"/> No			

Debtor

Buffets LLC (aka Ovation Brands)
Name

Case number (if known) 21-30723-SGJ

- ☐ Yes. Is any of the debtor's property stored at the cooperative?
- ☐ No
- ☐ Yes

35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?

- ☐ No
- ☐ Yes. Book value _____ Valuation method _____ Current value _____

36. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- ☐ No
- ☐ Yes

37. Has any of the property listed in Part 6 been appraised by a professional within the last year?

- ☐ No
- ☐ Yes

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☒ No. Go to Part 8.
- ☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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39. Office furniture

40. Office fixtures

41. Office equipment, including all computer equipment and communication systems equipment and software

42. **Collectibles** Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. Total of Part 7

Add lines 39 through 42. Copy the total to line 86.

44. Is a depreciation schedule available for any of the property listed in Part 7?

- ☐ No
- ☐ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

- ☐ No
- ☐ Yes

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☒ No. Go to Part 9.
- ☐ Yes. Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles

48. Watercraft, trailers, motors, and related accessories Examples: Boats,

Debtor Buffets LLC (aka Ovation Brands)
NameCase number (if known) 21-30723-SGJ

trailers, motors, floating homes, personal watercraft, and fishing vessels

49. Aircraft and accessories**50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)****51. Total of Part 8**

Add lines 47 through 50. Copy the total to line 87.

52. Is a depreciation schedule available for any of the property listed in Part 8?

- ☐ No
- ☐ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- ☐ No
- ☐ Yes

Part 9: Real property**54. Does the debtor own or lease any real property?**

- ☐ No. Go to Part 9.
- ☒ Yes. Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

	Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1	HTB - BLDG 127 WEST VALLEY BOULEVARD RIALTO CA 92376	Lessee-lease agreement			Unknown
55.2	HTB - BLDG 1431 SOUTH BRADLEY ROAD SANTA MARIA CA 93454	Lessee-lease agreement			Unknown
55.3	HTB - BLDG 1850 W EMPIRE AVE BURBANK CA 91504	Lessee-lease agreement			Unknown
55.4	HTB - GRD 127 WEST VALLEY BOULEVARD RIALTO CA 92376	Lessee-lease agreement			Unknown
55.5	HTB - GRD 127 WEST VALLEY BOULEVARD RIALTO CA 92376	Lessee-lease agreement			Unknown
55.6	HTB - GRD 1850 W EMPIRE AVE BURBANK CA 91504	Lessee-lease agreement			Unknown
55.7	HTB 10542-A SE WASHINGTON ST PORTLAND OR 97216	Lessee-lease agreement			Unknown
55.8	HTB 1315 GATEWAY BLVD FAIRFIELD CA 94533	Lessee-lease agreement			Unknown
55.9	HTB 2900 DEERFIELD DR JANESVILLE WI 53546	Lessee-lease agreement			Unknown
55.10	HTB 3520 W CARSON ST TORRANCE CA 90503	Lessee-lease agreement			Unknown
55.11	HTB 651 PALOMAR STREET CHULA VISTA CA 91911	Lessee-lease agreement			Unknown
55.12	OCB - BLDG 2513 MAIN STREET UNION GAP WA 98903	Lessee-lease agreement			Unknown
55.13	OCB 14150 NICOLLET AVE BURNSVILLE MN 55337	Lessee-lease agreement			Unknown
55.14	OCB 4401 TRANSIT RD BUFFALO NY 14221	Lessee-lease agreement			Unknown
55.15	OCB 5083 JONESTOWN ROAD HARRISBURG PA 17112	Lessee-lease agreement			Unknown
55.16	OCB 821 COUNTY ROUTE 64 ELMIRA NY 14903	Lessee-lease agreement			Unknown
55.17	OCB-BUFFALO-4401 TRANSIT RD, BUFFALO, NY 14221	Lessee-lease agreement			Unknown

Debtor Buffets LLC (aka Ovation Brands)
NameCase number (if known) 21-30723-SGJ

55.18	RYAN 1000 BREVARD RD ASHEVILLE NC 28806	Lessee-lease agreement				Unknown
55.19	RYAN 1314 N MAIN STREET SUMMERVILLE SC 29483	Lessee-lease agreement				Unknown
55.20	RYAN 2305 SHORTER AVE SW ROME GA 30165	Lessee-lease agreement				Unknown
55.21	RYAN 243 STEVEN B TANGER BLVD COMMERCE GA 30529	Lessee-lease agreement				Unknown
55.22	RYAN 3607 HWY 17 S NORTH MYRTLE BEACH SC 29582	Lessee-lease agreement				Unknown
55.23	TJ 1040 HELEN POWER DRIVE VACAVILLE CA 95687	Lessee-lease agreement				Unknown
55.24	TJ 3801 PELANDALE AVE BUILDING D MODESTO CA 95356	Lessee-lease agreement				Unknown
55.25	TJ 4015 W CALDWELL VISALIA CA 93277	Lessee-lease agreement				Unknown
55.26	TJ 485 MADONNA ROAD SAN LUIS OBISPO CA 93405	Lessee-lease agreement				Unknown
55.27	TJ 7006 NORTH CEDAR AVENUE FRESNO CA 93720	Lessee-lease agreement				Unknown

56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

Unknown

57. Is a depreciation schedule available for any of the property listed in Part 9?

- ☒ No
☐ Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 10: Intangibles and intellectual property**59. Does the debtor have any interests in intangibles or intellectual property?**

- ☐ No. Go to Part 11.
☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets			
61. Internet domain names and websites			
62. Licenses, franchises, and royalties			
63. Customer lists, mailing lists, or other compilations Customer lists from loyalty programs			unknown
64. Other intangibles, or intellectual property Intellectual Property			unknown
65. Goodwill			

66. Total of Part 10.

Add lines 60 through 65. Copy the total to line 89.

Unknown

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

- ☐ No
☒ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☒ No
☐ Yes

Debtor

Buffets LLC (aka Ovation Brands)
Name

Case number (if known) 21-30723-SGJ

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.
☒ Yes. Fill in the information below.

Current value
of debtor's

71. Notes receivable

Description (include name of obligor)

Affiliate Receivables	\$55,000.00	—	\$ 0.00	= →	\$55,000.00
	Total face amount		doubtful or uncollectible amount		

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

	Tax year		
	Tax year		
	Tax year		

73. Interests in insurance policies or annuities

74. Causes of action against third parties (whether or not a lawsuit has been filed)

Nature of claim _____
Amount requested _____

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

Nature of claim _____
Amount requested _____

76. Trusts, equitable or future interests in property

77. Other property of any kind not already listed Examples: Season tickets, country club membership

78. Total of Part 11.

Add lines 71 through 77. Copy the total to line 90.

\$55,000.00

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form.

Debtor

Buffets LLC (aka Ovation Brands)
Name

Case number (if known) 21-30723-SGJ

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. Copy line 5, Part 1.	\$17,791.54	
81. Deposits and prepayments. Copy line 9, Part 2.	\$13,944.91 + Unknown	
82. Accounts receivable. Copy line 12, Part 3.		
83. Investments. Copy line 17, Part 4.	unknown	
84. Inventory. Copy line 23, Part 5.		
85. Farming and fishing-related assets. Copy line 33, Part 6.		
86. Office furniture, fixtures, and equipment; and collectibles. Copy line 43, Part 7.		
87. Machinery, equipment, and vehicles. Copy line 51, Part 8.		
88. Real property. Copy line 56, Part 9. →		Unknown
89. Intangibles and intellectual property. Copy line 66, Part 10.	Unknown	
90. All other assets. Copy line 78, Part 11. +	\$55,000.00	
91. Total. Add lines 80 through 90 for each column. 91a.	\$86,736.45 + Unknown	91b. Unknown
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92.		\$86,736.45 + Unknown

Fill in this information to identify the case:

Debtor name	Buffets LLC		
United States Bankruptcy Court for the:		District of	
		(State)	
Case number (If known):	21-30723-SGJ		

Official Form 206D

☐ Check if this is an amended filing
Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims**2. List in alphabetical order all creditors who have secured claims.**

If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of Claim Do not deduct the value	Column B Value of collateral that supports this claim
2.1	Creditor's name		
s1586	UNSECURED CREDITORS TRUSTEE	\$0.00	Undetermined
	Creditor's Mailing Address		
	FOR THE UNSECURED CREDITORS TRUST 101 PARK AVENUE NEW YORK, NY 10178		
	Creditor's email address, if known		
	jhunt@metaadvisorsllc.com		
	Date debt was incurred		
	5/21/2017		
	Last 4 digits of account number		
	Do multiple creditors have an interest in the same property?		
	<input checked="" type="checkbox"/> No		
	<input type="checkbox"/> Yes. Have you already specified the relative priority?		
	<input checked="" type="checkbox"/> No. Specify each creditor, including this creditor and its relative priority.		
	<input type="checkbox"/> Yes. The relative priority of creditors is specified on lines		
	Describe debtor's property that is subject to a lien		
	Substantially all assets		
	Describe the lien		
	Secured debt arising under the Debtors' Second Amended Joint Plan of Reorganization Under Chapter 11 of the Bankruptcy Code in bankruptcy case no. 16-50557. Debt has been paid in full pursuant to terms of the plan		
	Is the creditor an insider or related party?		
	<input checked="" type="checkbox"/> No		
	<input type="checkbox"/> Yes		
	Is anyone else liable on this claim?		
	<input type="checkbox"/> No.		
	<input checked="" type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).		
	As of the petition filing date, the claim is:		
	Check all that apply.		
	<input type="checkbox"/> Contingent		
	<input type="checkbox"/> Unliquidated		
	<input checked="" type="checkbox"/> Disputed		

Case Number (if known)

Column B

Value of collateral
that supports this
claim

Debtor

Buffets LLC

21-30723-SGJ

Name

Case Number (if known)

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address	On which line in Part 1 did you enter the related creditor?	Last 4 digits of account number for this entity
UNSECURED CREDITORS' TRUSTEE FOR IN RE BUFFETS, LLC, ET. AL SHARI L. HEYEN 1000 LOUISIANA, SUITE 1700 HOUSTON, TX 77002	s1586	
VITANOVA BRANDS, LLC C/O CARRINGTON, COLEMAN, SLOMAN & BLUMENTHAL, L.L.P. MIKE SUTHERLAND 901 MAIN ST., STE. 5500 DALLAS, TX 75202	s1601	

Name

Case Number (if known)

Part 3:

Total Amounts of the Claims Secured by Property

3a. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

3a.

Total of Claim Amounts
\$500,000.00

Fill in this information to identify the case:

Debtor name **Buffets LLC (aka Ovation Brands)**

United States Bankruptcy Court for the: _____ District of _____

(State)

Case number (If known): **21-30723-SGJ**

Official Form 206E/F

☐ Check if this is an amended filing
Schedule E/F: Creditors Who Have Unsecured Claims**12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Assets - Real and Personal Property (Official Form 206A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: All Creditors with PRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

			Total Claim	Priority Amount
2.1	Priority creditor's name and mailing address	As of the petition filing date, the claim is:		
s1636	ALAMEDA COUNTY, CALIFORNIA 1221 OAK ST, RM 131 TAX COLLECTOR OAKLAND, CA 94612-4286	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$7,116.96	\$7,116.96
	Date or dates debt was incurred Various	Basis for the claim: BUSINESS PERSONAL PROPERTY		
	Last 4 digits of account number			
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.2	Priority creditor's name and mailing address	As of the petition filing date, the claim is:		
s1559	ARIZONA DEPARTMENT OF REVENUE PO BOX 29010 PHOENIX, AZ 85038-9010	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$69,260.43	\$69,260.43
	Date or dates debt was incurred	Basis for the claim: SALES TAX		
	Last 4 digits of account number			
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (___8___)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.3	Priority creditor's name and mailing address	As of the petition filing date, the claim is:		
s1661	BANKS COUNTY, GEORGIA 150 HUDSON RIDGE STE 7 TAX COMMISSIONER HOMER, GA 30547-3126	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$3,157.05	\$3,157.05
	Date or dates debt was incurred Various	Basis for the claim: BUSINESS PERSONAL PROPERTY		
	Last 4 digits of account number			
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor Name

Case Number (if known)

Part 1: All Creditors with PRIORITY Unsecured Claims

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			Total Claim	Priority Amount
2.4	Priority creditor's name and mailing address	As of the petition filing date, the claim is:		
s1669	BERKELEY COUNTY, SOUTH CAROLINA PO BOX 6122 TREASURER MONCKS CORNER, SC 29461-6120	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,417.87	\$1,417.87
	Date or dates debt was incurred Various	Basis for the claim: BUSINESS PERSONAL PROPERTY		
	Last 4 digts of account number			
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.5	Priority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,965.04	\$1,965.04
s1688	BUNCOMBE COUNTY TAX DEPARTMENT PO BOX 3140 ASHEVILLE, NC 28802-3140	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Date or dates debt was incurred Various	Basis for the claim: BUSINESS PERSONAL PROPERTY		
	Last 4 digts of account number			
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.6	Priority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,064,157.30	\$1,064,157.30
s1560	CALIFONIA DEPT OF TAX AND FEE ADMINISTRATION PO BOX 942879 SACRAMENTO, CA 942879	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Date or dates debt was incurred	Basis for the claim: SALES TAX		
	Last 4 digts of account number			
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (___8___)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.7	Priority creditor's name and mailing address	As of the petition filing date, the claim is:	\$346,666.31	\$346,666.31
s1561	CALIFORNIA STATE-DEPT OF INDUSTRIAL RELATIONS PO BOX 942857 FRANCHISE TAX BOARD SACRAMENTO, CA 94257-0631	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Date or dates debt was incurred	Basis for the claim: FRANCHISE TAX		
	Last 4 digts of account number			
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (___8___)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor Name

Case Number (if known)

Part 1: All Creditors with PRIORITY Unsecured Claims

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			Total Claim	Priority Amount
2.8	Priority creditor's name and mailing address	As of the petition filing date, the claim is:		
s1750	CLACKAMAS COUNTY, OREGON PO BOX 6100 PORTLAND, OR 97228-6100	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$5,655.56	\$5,655.56
	Date or dates debt was incurred Various	Basis for the claim: BUSINESS PERSONAL PROPERTY		
	Last 4 digits of account number			
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.9	Priority creditor's name and mailing address	As of the petition filing date, the claim is:		
s1751	CLARK COUNTY, WASHINGTON TREASURER'S OFFICE PO BOX 35150 SEATTLE, WA 98124-5150	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$5,587.96	\$5,587.96
	Date or dates debt was incurred Various	Basis for the claim: BUSINESS PERSONAL PROPERTY		
	Last 4 digits of account number			
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.10	Priority creditor's name and mailing address	As of the petition filing date, the claim is:		
s1562	GEORGIA DEPARTMENT OF REVENUE PO BOX 10549 TAXPAYER SERVICES DIVISION ATLANTA, GA 30348-5499	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$52,771.01	\$52,771.01
	Date or dates debt was incurred	Basis for the claim: SALES TAX		
	Last 4 digits of account number			
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (___8___)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.11	Priority creditor's name and mailing address	As of the petition filing date, the claim is:		
s1871	HARRISON COUNTY, WEST VIRGINIA 301 W MAIN ST TAX COLLECTOR CLARKSBURG, WV 26301	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,066.08	\$2,066.08
	Date or dates debt was incurred Various	Basis for the claim: BUSINESS PERSONAL PROPERTY		
	Last 4 digits of account number			
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor Name

Case Number (if known)

Part 1: All Creditors with PRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

			Total Claim	Priority Amount
2.12	Priority creditor's name and mailing address	As of the petition filing date, the claim is:		
s1887	HORRY COUNTY, SOUTH CAROLINA PO BOX 1275 TREASURERS OFFICE CONWAY, SC 29528	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,182.49	\$2,182.49
	Date or dates debt was incurred Various	Basis for the claim: BUSINESS PERSONAL PROPERTY		
	Last 4 digts of account number			
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ()	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.13	Priority creditor's name and mailing address	As of the petition filing date, the claim is:	\$76,511.20	\$76,511.20
s1563	ILLINOIS DEPARTMENT OF REVENUE PO BOX 19035 SPRINGFIELD, IL 62794-9035	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Date or dates debt was incurred	Basis for the claim: SALES TAX		
	Last 4 digts of account number			
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.14	Priority creditor's name and mailing address	As of the petition filing date, the claim is:	\$36,197.10	\$36,197.10
s1564	INDIANA DEPARTMENT OF REVENUE PO BOX 6032 INDIANAPOLIS, IN 46206-6032	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Date or dates debt was incurred	Basis for the claim: SALES TAX		
	Last 4 digts of account number			
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.15	Priority creditor's name and mailing address	As of the petition filing date, the claim is:	\$15,742.00	\$15,742.00
s1565	KENTUCKY STATE TREASURER KENTUCKY DEPATMENT OF REVENUE FRANKFORT, KY 40619	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Date or dates debt was incurred	Basis for the claim: SALES TAX		
	Last 4 digts of account number			
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor Name

Case Number (if known)

Part 1: All Creditors with PRIORITY Unsecured Claims

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			Total Claim	Priority Amount
2.16	Priority creditor's name and mailing address	As of the petition filing date, the claim is:		
s1925	LAKE COUNTY, INDIANA 2293 N MAIN ST TREASURER OF LAKE COUNTY CROWN POINT, IN 46307	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$26,649.14	\$26,649.14
	Date or dates debt was incurred Various	Basis for the claim: BUSINESS PERSONAL PROPERTY		
	Last 4 digts of account number			
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.17	Priority creditor's name and mailing address	As of the petition filing date, the claim is:		
s1566	LOUISIANA DEPARTMENT OF REVENUE PO BOX 4969 BATON ROUGE, LA 70821-4969	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$16,612.55	\$16,612.55
	Date or dates debt was incurred	Basis for the claim: SALES TAX		
	Last 4 digts of account number			
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (___8___)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.18	Priority creditor's name and mailing address	As of the petition filing date, the claim is:		
s1567	MINNESOTA DEPARTMENT OF REVENUE PO BOX 64649 SAINT PAUL, MN 55164-0649	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$16,684.66	\$16,684.66
	Date or dates debt was incurred	Basis for the claim: SALES TAX		
	Last 4 digts of account number			
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (___8___)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.19	Priority creditor's name and mailing address	As of the petition filing date, the claim is:		
s1981	NASH COUNTY, NORTH CAROLINA 120 WEST WASHINGTON ST STE 2058 TAX DEPARTMENT NASHVILLE, NC 27856	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,507.50	\$1,507.50
	Date or dates debt was incurred Various	Basis for the claim: BUSINESS PERSONAL PROPERTY		
	Last 4 digts of account number			
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor Name

Case Number (if known)

Part 1: All Creditors with PRIORITY Unsecured Claims

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			Total Claim	Priority Amount
2.20	Priority creditor's name and mailing address	As of the petition filing date, the claim is:	\$59,687.08	\$59,687.08
s1568	NEW YORK STATE DEPT OF TAX AND FINANCE COMMISSIONER OF TAXATION AND FINANCE NYS ASSESSMENT RECEIVABLES PO BOX 4127 BINGHAMTON, NY 13902-4127	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Date or dates debt was incurred	Basis for the claim: SALES TAX		
	Last 4 digts of account number			
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (<u>8</u>)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.21	Priority creditor's name and mailing address	As of the petition filing date, the claim is:	\$134,937.70	\$134,937.70
s1569	NORTH CAROLINA DEPARTMENT OF REVENUE PO BOX 25000 RALEIGH, NC 27640-0002	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Date or dates debt was incurred	Basis for the claim: SALES TAX		
	Last 4 digts of account number			
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (<u>8</u>)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.22	Priority creditor's name and mailing address	As of the petition filing date, the claim is:	\$14,260.94	\$14,260.94
s1570	OHIO DEPARTMENT OF TAXATION PO BOX 2678 COLUMBUS, OH 43216-2678	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Date or dates debt was incurred	Basis for the claim: SALES TAX		
	Last 4 digts of account number			
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (<u>8</u>)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.23	Priority creditor's name and mailing address	As of the petition filing date, the claim is:	\$35,412.19	\$35,412.19
s1571	PA DEPARTMENT OF REVENUE PO BOX 280404 HARRISBURG, PA 17128-0404	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Date or dates debt was incurred	Basis for the claim: SALES TAX		
	Last 4 digts of account number			
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (<u>8</u>)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor Name

Case Number (if known)

Part 1: All Creditors with PRIORITY Unsecured Claims

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			Total Claim	Priority Amount
2.24	Priority creditor's name and mailing address	As of the petition filing date, the claim is:		
s2016	PIERCE COUNTY, WASHINGTON PO BOX 11621 BUDGET FINANCE TACOMA, WA 98411-6621	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$3,468.88	\$3,468.88
	Date or dates debt was incurred Various	Basis for the claim: BUSINESS PERSONAL PROPERTY		
	Last 4 digits of account number			
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.25	Priority creditor's name and mailing address	As of the petition filing date, the claim is:		
s1572	SOUTH CAROLINA DEPARTMENT OF REVENUE PO BOX 2535 COLUMBIA, SC 29202-2535	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$41,659.71	\$41,659.71
	Date or dates debt was incurred	Basis for the claim: SALES TAX		
	Last 4 digits of account number			
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (___8___)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.26	Priority creditor's name and mailing address	As of the petition filing date, the claim is:		
s1100	STATE OF DELAWARE PO BOX 5509 BINGHAMTON, NJ 13902	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,570.00	\$1,570.00
	Date or dates debt was incurred 2/1/2020	Basis for the claim: TAX NOTICE		
	Last 4 digits of account number			
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (___8___)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.27	Priority creditor's name and mailing address	As of the petition filing date, the claim is:		
s1573	STATE OF MAINE PO BOX 9101 MAINE REVENUE SERVICES AUGUSTA, ME 04332-9101	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$14,490.16	\$14,490.16
	Date or dates debt was incurred	Basis for the claim: SALES TAX		
	Last 4 digits of account number			
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (___8___)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor Name

Case Number (if known)

Part 1: All Creditors with PRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

			Total Claim	Priority Amount
2.28	Priority creditor's name and mailing address	As of the petition filing date, the claim is:		
s1574	STATE OF MISSISSIPPI PO BOX 1033 JACKSON, MS 39215	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$15,681.72	\$15,681.72
	Date or dates debt was incurred	Basis for the claim: SALES TAX		
	Last 4 digts of account number			
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (<u>8</u>)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.29	Priority creditor's name and mailing address	As of the petition filing date, the claim is:		
s1575	STATE OF WASHINGTON DEPT OF REVENUE PO BOX 47476 TAXPAYER ACCT ADMIN DIVISION OLYMPIA, WA 98504-7476	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$171,241.23	\$171,241.23
	Date or dates debt was incurred	Basis for the claim: SALES TAX		
	Last 4 digts of account number			
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (<u>8</u>)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.30	Priority creditor's name and mailing address	As of the petition filing date, the claim is:		
s1576	STATE OF WEST VIRGINIA STATE TAX DEPT PO BOX 2745 TAXPAYER SERVICES DIVISION CHARLESTON, WV 25330-2745	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$61,161.97	\$61,161.97
	Date or dates debt was incurred	Basis for the claim: SALES TAX		
	Last 4 digts of account number			
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (<u>8</u>)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.31	Priority creditor's name and mailing address	As of the petition filing date, the claim is:		
s1577	TENNESSEE DEPARTMENT OF REVENUE 500 DEADERICK STREET ANDREW JACKSON STATE OFFICE BUILDING NASHVILLE, TN 37242	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$34,699.42	\$34,699.42
	Date or dates debt was incurred	Basis for the claim: SALES TAX		
	Last 4 digts of account number			
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (<u>8</u>)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor Name

Case Number (if known)

Part 1: All Creditors with PRIORITY Unsecured Claims

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			Total Claim	Priority Amount
2.32	Priority creditor's name and mailing address	As of the petition filing date, the claim is:		
s1578	TEXAS COMPTROLLER OF PUBLIC ACCOUNTS PO BOX 149348 AUSTIN, TX 78714-9348	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$106.00	\$106.00
	Date or dates debt was incurred	Basis for the claim: SALES TAX		
	Last 4 digts of account number			
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.33	Priority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,649.05	\$1,649.05
s2178	WARE COUNTY, GEORGIA PO BOX 1825 TAX COMMISSIONER WAYCROSS, GA 31502-1875	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Date or dates debt was incurred Various	Basis for the claim: BUSINESS PERSONAL PROPERTY		
	Last 4 digts of account number			
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ()	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.34	Priority creditor's name and mailing address	As of the petition filing date, the claim is:	\$55,572.74	\$55,572.74
s1579	WISCONSIN DEPARTMENT OF REVENUE PO BOX 8902 MADISON, WI 53708-8902	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Date or dates debt was incurred	Basis for the claim: SALES TAX		
	Last 4 digts of account number			
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Amount of Claim

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

3.1	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$8,333.33
s1615	2613 E CLAIREMONT, LLC 2822 LONDON ROAD EAU CLAIRE, WI 54701	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,100.00
s1616	3'S AMIGOS LANDSCAPING 1445 E EL MORO CIR MESA, AZ 85204	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.3	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$400.00
s1617	5 STAR LAWNS LLC PO BOX 2529 WAYCROSS, GA 31502	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.4	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$258,028.82
s1618	5561 SULTANA LLC C/O HIGHPOINT CAPITAL GROUP LLC 18321 VENTURA BLVD SUITE 980 TARZANA, CA 91356	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Amount of Claim

3.5	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$10,921.68
s1619	A & W PLUMBING AND HEATING 11 ALLIANCE AVE MURPHYSBORO, IL 62966	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.6	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$348.82
s1620	A ONE REFRIGERATION & HEATING INC 1611 W KENNEWICK AVE KENNEWICK, WA 99336	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.7	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$438.00
s1621	A+ UPHOLSTERY & DESIGN RONALD JAMES HUMBERD 2000 NE 42ND AVE #129 PORTLAND, OR 97213	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.8	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$3,741.80
s1622	AAA LANDSCAPING LLC 358 RIDGEWAY DR BRIDGEPORT, WV 26330	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.9	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,719.87
s1623	AAA QUALITY APPLIANCE CARE 243 GRIMES STREET SUITE B EUGENE, OR 97402	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.10	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$966.34
s1624	AB DEPENDABLE LOCK & SAFE LLC 74737 HIGHWAY 41 PEARL RIVER, LA 70452	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.11	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$14,453.89
s2614	AB REAL ESTATE LLC 2338 N. LOOP 1604 W. STE 350 SAN ANTONIO, TX 78248	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred	Basis for the claim: PROPERTY TAX DUE TO LANDLORD	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.12	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,922.56
s1625	ABC FIRE CONTROL INC 1113 N 6TH AVE YAKIMA, WA 98902	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.13	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$720.78
s1626	ABRAHAMS CARPET AND FLOOR CLEANING 1408 EAST 20TH STREET SANTA ANA, CA 92705	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.14	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$63,666.10
s1627	ACADEMY FIRE LIFE SAFETY LLC 42 BROADWAY LYNBROOK, NY 11563	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.15	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$3,153.25
s1628	ACE EQUIPMENT AND SPECIALTY SERVICES 1880 HARBOR DR SPRINGFIELD, OR 97477	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.16	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$520.00
s1629	ADC CLEANING SERVICES LLC 813 BARCELONA STREET TOWNSEND, DE 19734	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.17	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$15,566.79
s1630	ADVANCED GRAPHIX 4MZ INC 520 23RD STREET LUBBOCK, TX 79404	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: MARKETING	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.18	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$3,458.69
s1631	ADVANCED PLUMBING AND ROOTER SERVICE 38 COMMERCE PL STE A VACAVILLE, CA 95687	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.19	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$4,641.12
s1447	AGILEO LOPEZ ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred	Basis for the claim: LITIGATION-WAGE&HOUR	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.20	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1049	AGUILAR,MARIA ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 10/26/2018	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.21	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1070	AGUILAR,STELLA ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 11/18/2019	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.22	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$16,719.90
s1632	AIR FLOW AIR CONDITIONING REFRIGERATION INC 26007 N 101 AVE PEORIA, AZ 85383	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.23	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$141,194.60
s1633	AIRESPRING INC 1801 W OLYMPIC BLVD FILE 1422 PASADENA, CA 91199-1422	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.24	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$500.00
s1634	AJ'Z CARPET CLEANING 10148 4TH PL HIGHLAND, IN 46322	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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			Amount of Claim
3.25	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$312,749.76
s1635	AKERMAN LLP PO BOX 4906 ORLANDO, FL 32802	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PROFESSIONALS	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.26	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,500.00
s1637	ALERT FIRE SYSTEMS PO BOX 1169 STATHAM, GA 30666	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.27	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1091	ALFARO,MARIA ADDRESS REDACTED	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred 11/18/2019	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.28	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,329.24
s1638	ALL METALS SOLUTIONS LLC PO BOX 10775 YAKIMA, WA 98909	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.29	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$938.00
s1639	ALL OUT LANDSCAPING INC 184 MORGAN COVE RD CANDLER, NC 28715	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.30	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$14,573.10
s1640	ALLIANT ENERGY / WP&L PO BOX 3062 CEDAR RAPIDS, IA 52406-3062	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.31	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1089	ALLISON,EDWARD ADDRESS REDACTED	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred 4/13/2019	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.32	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,174.46
s1641	ALPINE REFRIGERATION HEATING & COOLING PO BOX 395 NIPOMO, CA 93444	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.33	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$255.00
s1642	ALTERNATIVE PLUMBING PLUS INC 6205 N SUMMIT STREET TOLEDO, OH 43611	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.34	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1068	ALVAREZ,ROSALBA ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 2/21/2020	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.35	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$286.97
s1643	AMEREN ILLINOIS PO BOX 88034 CHICAGO, IL 60680-1034	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.36	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$3,578.32
s1644	AMRON MECHANICAL INC PO BOX 4123 MANTECA, CA 95337	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.37	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1074	ANAYA,SONIA ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 1/22/2017	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.38	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$18,343.81
s1646	ANDERSON MARKETING GROUP 7420 BLANCO ROAD SUITE 200 SAN ANTONIO, TX 78216	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: MARKETING	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.39	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,366.25
s1647	ANGEL PLUMBING SERVICES 11427 ARMINTA ST NORTH HOLLYWOOD, CA 91605	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.40	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$20,884.77
s1648	APPALACHIAN POWER PO BOX 371496 PITTSBURG, PA 1520-7496	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.41	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$24,414.37
s1649	<p>APS PO BOX 60015 PRESCOTT, AZ 86304-6015</p> <p>Date or dates debt was incurred Various</p> <p>Last 4 digts of account number</p>	<p>Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: UTILITIES</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.42	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$6,664.45
s1650	<p>ARAMARK UNIFORM SERVICES 115 NORTH FIRST STREET BURBANK, CA 91502</p> <p>Date or dates debt was incurred Various</p> <p>Last 4 digts of account number</p>	<p>Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: GENERAL & ADMINISTRATIVE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.43	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,144,351.72
s1651	<p>ARC PROPERTIES PARTNERSHIP LP PO BOX 847390 ARC PROPERTIES PARTNERSHIP LP DALLAS, TX 75284-7390</p> <p>Date or dates debt was incurred Various</p> <p>Last 4 digts of account number</p>	<p>Check all that apply.</p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: RENT</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.44	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$351.50
s1652	<p>ARIZONA CUTLERY & SHARPENING SERVICE INC 12620 N CAVE CREEK RD STE 4 PHOENIX, AZ 85022</p> <p>Date or dates debt was incurred Various</p> <p>Last 4 digts of account number</p>	<p>Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: GENERAL & ADMINISTRATIVE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.45	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1419	ARMANDO SARMENTO ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred	Basis for the claim: LITIGATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.46	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$14.65
s1653	AT&T PO BOX 5019 CAROL STREAM, IL 60197-5019	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.47	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$3,170.51
s1654	ATMOS ENERGY CORPORATION PO BOX 790311 ST LOUIS, MO 63179-0311	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.48	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,175.00
s1655	AYALA LANDSCAPING LLC ANDRES AYALA 133 MACARTHUR DR WILMINGTON, DE 19804	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.49	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$470.62
s1656	AZUSA LIGHT & WATER PO BOX 7030 ARTESIA, CA 90702-7030	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.50	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,291.14
s1657	B&R FIRE AND SAFETY PO BOX 91426 LOUISVILLE, KY 40291	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.51	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$347.50
s1658	BACKFLOW INDEPENDANT TESTING & SERVICE 5671 E MADISON AVE FRESNO, CA 93727	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.52	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$761.00
s1659	BAKER & MCKENZIE, LLP 1900 NORTH PEARL ST., SUITE 1500 DALLAS, TX 75201	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PROFESSIONALS	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Amount of Claim

3.53	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$98.00
s1660	BAKERSFIELD, CALIFORNIA PO BOX 2057 FINANCE DEPT BAKERSFIELD, CA 93303	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.54	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,314.01
s1662	BARGREEN ELLINGSON PO BOX 94328 LOCKBOX #310055 SEATTLE, WA 98124-6628	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.55	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,673.74
s1663	BEAVERTON, OREGON PO BOX 4755 BEAVERTON, OR 97005	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.56	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$262,521.30
s1664	BELL PALM PLAZA LP ACCT# 110771 HO004090 PO BOX 353 RODEO, CA 94572	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.57	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$130,805.93
s1665	BENCHMARK CLARENCE ASSOCIATES LLC 4053 MAPLE RD SUITE 200 AMHERST, NY 14226	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.58	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$202.89
s1666	BENEDICT REFRIGERATION INC 1003 HARLEM ST ALTOONA, WI 54720	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.59	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$7,669.36
s1668	BENTON PUD PO BOX 6270 2721 WEST 10TH AVE KENNEWICK, WA 99336-0270	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.60	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$19,268.42
s1670	BERKELEY ELECTRIC COOPERATIVE INC PO BOX 530812 ATLANTA, GA 30353-0812	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Amount of Claim

3.61	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,537.80
s1671	BEST & FLANAGAN LLP 60 SOUTH SIXTH STREET, SUITE 2700 MINNEAPOLIS, MN 55402	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PROFESSIONALS	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.62	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$195,954.12
s1672	BG BIG FLATS II-III LLC C/O DLC MANAGEMENT CORP PO BOX 5122 WHITE PLAINS, NY 10602-5122	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.63	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$495.93
s1673	BIG FLATS, NEW YORK 476 MAPLE ST WATER UTILITIES BIG FLATS, NY 14814-9799	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.64	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$170,274.50
s1674	BIGGI DEVELOPMENT PARTNERSHIP PO BOX 1698 BEAVERTON, OR 97075	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.65	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$4,897.68
s1675	BIX PRODUCE CO LLC 3060 CENTERVILLE RD LITTLE CANADA, MN 55117	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: FOOD/BEVERAGE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.66	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$10,027.53
s1676	BLAKE COMPANY INC PO BOX 1776 KENT, WA 98035-1776	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.67	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$315,000.00
s1677	BLUE BANNER PROPERTIES, LLC PO BOX 226 RIVERSIDE, CA 92502	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.68	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$58,110.43
s1678	BLUE CROSS BLUE SHIELD OF TEXAS PO BOX 650615 DALLAS, TX 75265-0615	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: INSURANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.69	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,310.01
s1679	BOB LARSON PLUMBING LLC 4320 128TH STREET E TACOMA, WA 98446	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.70	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,850.56
s1680	BOWLING GREEN MUNICIPAL UTILITY PO BOX 10360 BOWLING GREEN, KY 42102-0360	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.71	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$4,155.50
s1681	BOWLING GREEN REFRIGERATION INC PO BOX 1096 BOWLING GREEN, KY 42102-1096	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.72	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$8,200.00
s1682	BOWLING GREEN, KENTUCKY PO BOX 1410 BOWLING GREEN, KY 42101	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.73	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$253,508.00
s1683	BRADLEY PARTNERSHIP RENT PACIFICA COMMERCIAL REALTY 2520 PROFESSIONAL PARKWAY SANTA MARIA, CA 93455	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.74	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$248,032.62
s1684	BRFI GATEWAY, LLC PO BOX 3577 DEPT P SEATTLE, WA 98124-3577	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.75	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$195,416.04
s1685	BRICKTOWN SQUARE LLC PO BOX 310655 DES MOINES, IA 50331-0655	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.76	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$11,296.34
s1686	BROTHERS PRODUCE INC - HOUSTON PO BOX 1207 FRIENDSWOOD, TX 77549	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: FOOD/BEVERAGE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.77	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$655.21
s1687	BUFFALOS EXPERT SERVICE TECHNICIANS INC 3003 GENESEE STREET BUFFALO, NY 14225	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.78	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$356,195.60
s2618	BUFFETS EMPLOYEE PAID TIME OFF (NOT ELIGIBLE UNDER 507(A)(4)(A))	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred	Basis for the claim: AGGREGATED PTO BUFFETS EMPLOYEE PAID TIME OFF (NOT ELIGIBLE UNDER 507(A)(4)(A))	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.79	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$27,684.40
s1689	BURBANK WATER AND POWER PO BOX 631 BURBANK, CA 91503-6031	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.80	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$474.50
s1690	BURBANK, CALIFORNIA PO BOX 6459 LICENSE & CODE SERVICES DIVISION BURBANK, CA 91510	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.81	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$475.00
s1691	BUZY BEE BOARD UP 27 N WACKER DR SUITE # 412 CHICAGO, IL 60606	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.82	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$3,299.54
s1692	C AND T HVACR 157 EAST THIRD ST CORNING, NY 14830	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.83	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$807.74
s1693	CADILLAC COFFEE CO PO BOX 932249 CLEVELAND, OH 44193	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: FOOD/BEVERAGE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.84	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$49,083.57
s1694	CAISSON REAL ESTATE BROKERAGE, LLC 7457 HARWIN DRIVE, SUITE 140 HOUSTON, TX 77036	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.85	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,316.94
s1695	CALIFORNIA STATE-DEPARTMENT OF INDUSTRIAL RELATIONS PO BOX 942857 FRANCHISE TAX BOARD SACRAMENTO, CA 94257-0631	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.86	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$3,850.29
s1696	CALIFORNIA WATER SERVICE CO PO BOX 51967 LOS ANGELES, CA 90051-6267	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.87	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$115.00
s1697	CAMP CREEK MOUNTAIN MAINTENANCE 1938 CAMP CREEK ROAD CAMP CREEK, WV 25820	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.88	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,728.69
s1698	CAMPBELL FIRE & SAFETY INC 1400 WARREN AVE MOUNT VERNON, IL 62864	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.89	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$6,873.00
s1699	CAPITOL CORPORATE SERVICES INC PO BOX 1831 AUSTIN, TX 78767	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.90	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$690.64
s1700	CAPITOL NEON 5920 ROSEBUD LANE SACRAMENTO, CA 95841	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.91	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$301.72
s1701	CAPITOL SQUARE MERCHANTS ASSOC 1388 SUTTER ST STE 730 SAN FRANCISCO, CA 94109	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.92	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$11,076.79
s1702	CAPITOL SQUARE PARTNERS 1388 SUTTER ST STE 730 SAN FRANCISCO, CA 94109	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.93	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$4,560.86
s1703	CARBONS GOLDEN MALTED PO BOX 129 CONCORDVILLE, PA 19331-0128	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.94	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1092	CARDENAS, JUANA ADDRESS REDACTED	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred 10/20/2017	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.95	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$34.68
s1704	CAREERBUILDER LLC 13047 COLLECTION CENTER DR CHICAGO, IL 60693-0130	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.96	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$45.91
s1705	CARLENE HARRELL 117 N JERNIGAN DR #24 UNION CITY, TN 38261	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

			Amount of Claim
3.97	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$3,300.00
s1706	CARPET DOCTOR MICHAEL D ALDRIDGE 97 RED TAIL LANE POPLAR BLUFF, MO 63901	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.98	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$26,821.34
s1707	CASCADE NATURAL GAS PO BOX 5600 BISMARCK, ND 58506-5600	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.99	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1038	CASTANEDA, ROSA ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 3/21/2019	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.100	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1065	CASTILLO VELAS,JORGE ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 3/17/2020	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Amount of Claim

3.101	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1078	CASTRO,LUZ ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.102	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$407.56
s1708	CEDAR LAKE ELECTRIC INC 20700 BAGLEY AVE FAIRBAULT, MN 55021-7836	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.103	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,039.32
s1709	CEN CAL MECHANICAL INC PO BOX 647 SANTA MARIA, CA 93456-0647	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.104	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$275,267.16
s1710	CENTERCAP HOLDING LLC PO BOX 826342 PHILADELPHIA, PA 19182-6342	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.105	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$16,671.68
s1711	CENTERPOINT ENERGY PO BOX 4981 HOUSTON, TX 77210-4981	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.106	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$13,101.75
s1712	CENTRAL MAINE POWER CO PO BOX 847810 BOSTON, MA 02284-7810	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.107	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$4,056.19
s1713	CHARLESTON SANITARY BOARD PO BOX 7949 CITY OF CHARLESTON FEES CHARLESTON, WV 25356-7949	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.108	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$20.00
s1714	CHARLESTON, WEST VIRGINIA 915 QUARRIER ST STE 4 CITY COLLECTORS OFFICE CHARLESTON, WV 25301	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.109	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,767.57
s1715	CHEMUNG COUNTY, NEW YORK 600 MILTON ST SEWER DISTRICTS ELMIRA, NY 14904	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.110	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$119.55
s1716	CHILL MASTERS INC PO BOX 41025 MESA, AZ 85274	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.111	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$96.70
s1717	CHOCK BARHOUM LLP 121 SW MORRISON STREET, SUITE 415 PORTLAND, OR 97204	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.112	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$44,360.50
s1718	CHRISTENSEN GROUP INSURANCE 9855 WEST 78TH STREET, SUITE 100 EDEN PRAIRIE, MN 55344	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: INSURANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.113	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$453.75
s1719	CHULA VISTA, CALIFORNIA PO BOX 142588 ALARM PROGRAM IRVING, TX 75014-2588	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.114	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$800.00
s1720	CIMCO INC PO BOX 480 CULLODEN, WV 25510	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.115	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$4,728.93
s1721	CITY OF ASHVILLE UTILITIES PO BOX 733 ASHEVILLE, NC 28802-0733	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.116	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$424.90
s1722	CITY OF BAKERSFIELD WATER SYSTEM 3725 SOUTH H ST BAKERSFIELD, CA 93304-6538	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Buffets LLC (aka Ovation Brands)

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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			Amount of Claim
3.117	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$5,753.33
s1723	CITY OF BEAVERTON UTILITIES PO BOX 3188 PORTLAND, OR 97208-3188	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.118	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$120.00
s1724	CITY OF CHICAGO PO BOX 95242 HANSEN IPI CHICAGO, IL 60694-5242	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.119	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$112.54
s1725	CITY OF CLARKSBURG ATTN: BUSINESS & OCCUPATION TAX RETURN 222 WEST MAIN STREET CLARKSBURG, WV 26301	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: BUSINESS LICENSE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.120	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$7,352.12
s1726	CITY OF CONROE UTILITIES PO BOX 1669 HOUSTON, TX 77251-1669	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.121	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,683.87
s1727	CITY OF DOWNEY - UTILITIES DIVISION DEPT LA 23221 PASADENA, CA 91185-3221	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.122	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$7,435.87
s1728	CITY OF FRESNO UTILITIES PO BOX 2069 UTILITIES BILLING & COLLECTION FRESNO, CA 93718-2069	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.123	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,025.89
s1729	CITY OF GARDEN GROVE UTILITIES PO BOX 3070 GARDEN GROVE, CA 92842-3070	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.124	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,943.88
s1730	CITY OF GREENFIELD UTILITY PO BOX 20739 GREENFIELD, WI 53220	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.125	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$5,761.70
s1731	CITY OF HEMET UTILITIES 445 EAST FLORIDA AVENUE HEMET, CA 92543-4209	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.126	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$3,252.84
s1732	CITY OF LAKE CHARLES WATER DIVISION PO BOX 1727 LAKE CHARLES, LA 70602	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.127	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$3,815.85
s1733	CITY OF LOMA LINDA UTILITIES 25541 BARTON RD FINANCE DEPT LOMA LINDA, CA 92354	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.128	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$3,013.42
s1734	CITY OF MESA UTILITIES PO BOX 1878 MESA, AZ 85211-1878	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.129	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$638.13
s1735	CITY OF MT. VERNON, IL UTILITIES 1100 MAIN STREET PO BOX 1708 MT VERNON, IL 62864	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.130	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,422.51
s1736	CITY OF NORTH MYRTLE BEACH UTILITY 1016 2ND AVE SOUTH UTILITY BILLING NORTH MYRTLE BEACH, SC 29582	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.131	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$9,390.04
s1737	CITY OF PHOENIX UTILITIES PO BOX 29100 PHOENIX, AZ 85038-9100	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.132	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$3,414.66
s1738	CITY OF PICAYUNE UTILITIES 203 GOODYEAR BLVD PICAYUNE, MS 39466	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.133	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,216.06
s1739	CITY OF ROME UTILITIES PO BOX 1711 ROME, GA 30162-1711	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.134	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$6,152.76
s1740	CITY OF SALEM UTILITY BILLING PO BOX 2795 PORTLAND, OR 97208-2795	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.135	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$5,314.88
s1741	CITY OF SAN DIEGO PUBLIC UTILITIES PUBLIC UTILITIES DEPT CUSTOMER CARE CENTER PO BOX 129020 SAN DIEGO, CA 92112-9020	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.136	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$5,809.01
s1742	CITY OF SANTA ANA UTILITIES TREASURY DIVISION-MUNICIPAL UTILITY SERVICES 20 CIVIC CENTER PLAZA-PO BOX 1964 SANTA ANA, CA 92702-1924	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Amount of Claim

3.137	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$20,868.74
s1743	CITY OF SANTA MARIA UTILITIES 110 E COOK ST RM 9 SANTA MARIA, CA 93454-5190	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.138	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$9,017.04
s1744	CITY OF STOCKTON UTILITIES PO BOX 7193 PASADENA, CA 91109-7193	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.139	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,029.82
s1745	CITY OF TORRANCE UTILITIES PO BOX 845629 LOS ANGELES, CA 90084-5629	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.140	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$4,518.07
s1746	CITY OF TURLOCK UTILITIES 156 S BROADWAY STE 114 FINANCE DIVISION TURLOCK, CA 95380	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Amount of Claim

3.141	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$886.89
s1747	CITY OF UNION GAP UTILITIES PO BOX 3008 UNION GAP, WA 98903	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<hr/>			
3.142	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$13,944.90
s1748	CITY OF VISALIA - UTILITY BILLING PO BOX 80268 CITY OF INDUSTRY, CA 91716-8268	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<hr/>			
3.143	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$955.00
s1749	CITY PLUMBING 3498 W ASHCROFT AVE FRESNO, CA 93722	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<hr/>			
3.144	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$371.40
s1752	CLARKSBURG, WEST VIRGINIA 222 WEST MAIN ST CLARKSBURG, WV 26301	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.145	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$7,864.33
s1753	CLAYS REFRIGERATION 445 RIVER AVE EUGENE, OR 97404	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.146	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$4,039.31
s1754	COACHELLA VALLEY WATER DISTRICT PO BOX 5000 COACHELLA, CA 92236-5000	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.147	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$9,871.74
s1755	COAST ELECTRIC POWER ASSOCIATION COAST EPA DEPARTMENT 1340 PO BOX 2153 BIRMINGHAM, AL 35287-1340	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.148	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$403.98
s1756	COASTAL REFRIGERATION SERVICE INC 2159 HIGHWAY 544, UNIT C CONWAY, SC 29526	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.149	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,956.02
s1757	COASTAL SUNBELT PRODUCE CO PO BOX 62860 BALTIMORE, MD 21264-2860	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: FOOD/BEVERAGE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.150	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$250,983.00
s1758	COBBLESTONE PROPERTIES LLC C/O SR MANAGEMENT SERVICES INC 900 N THIRD STREET MINNEAPOLIS, MN 55401	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.151	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$176,423.22
s1426	COBBLESTONE PROPERTIES, LLC ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred	Basis for the claim: LITIGATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.152	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$5,030.18
s1759	COCA COLA NORTH AMERICA PO BOX 102703 ATLANTA, GA 30368-2703	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.153	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$6,687.71
s1760	COFFEY REFRIGERATION PO BOX 6257 KENNEWICK, WA 99336	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.154	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,348.73
s1761	COIL CLEANERS PO BOX 5021 SPANAWAY, WA 98387	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.155	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$536,708.69
s1762	COLE BU PORTFOLIO II LLC PO BOX 732928 DALLAS, TX 75373-2928	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.156	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,433.52
s1763	COLUMBIA FIRE PROTECTION 3019 DUPORTAIL ST #124 RICHLAND, WA 99352	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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			Amount of Claim
3.157	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$10,002.02
s1764	COLUMBIA GAS PO BOX 4629 CAROL STREAM, IL 60197-4629	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.158	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$10,420.75
s1765	COMMERCE, GEORGIA PO BOX 499 COMMERCE, GA 30529-0010	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.159	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$22,038.75
s1173	COMMERCIAL COLLECTION CORP OF NY, INC FOR PEOPLE READY 34 SEYMOUR ST. TONAWANDA TONAWANDA, NY 14150	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 4/7/2021	Basis for the claim: DEMAND LETTER	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.160	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,750.00
s1766	COMMERCIAL EXPRESS HVAC INC PO BOX 710748 HERNDON, VA 20171	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.161	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$4,212.70
s1767	CONSTELLATION NEWENERGY INC PO BOX 4640 CAROL STREAM, IL 60197-4640	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.162	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,647.44
s1768	CONSTELLATION NEWENERGY-GAS DIVISION LLC 15246 COLLECTIONS CENTER DRIVE BANK OF AMERICA LOCKBOX SERVICES CHICAGO, IL 60693-0001	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.163	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$153.65
s1769	CONTINENTAL AIR CONDITIONING INC 3446 IVAR AVE ROSEMEAD, CA 91770	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.164	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$850.00
s1770	CONTRACTOR FIRE PROTECTION INC PO BOX 21514 MESA, AZ 85277	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.165	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,526.00
s1771	COOL STYLE CARPET CLEANING PO BOX 531134 SAN DIEGO, CA 92153-1134	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.166	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$757.37
s1772	COPPERFIELD PLUMBING 514 SAN REMO ST FAIRFIELD, CA 94533	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.167	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$29.13
s1773	CORREA, DIANA ADDRESS REDACTED	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: EMPLOYEE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.168	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,168.36
s1774	COUETTE ELECTRIC LLC 101 SUNSET LANE YAKIMA, WA 98901	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.169	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$739.80
s1775	COVINA, CALIFORNIA ALARM PROGRAM PO BOX 141565 IRVING, TX 75014-1565	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.170	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,013.00
s1776	COZZINI BROS INC 350 HOWARD AVE DES PLAINES, IL 60018	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.171	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$4,933.52
s1501	CROOK BROTHERS,INC. ADDRESS REDACTED	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred	Basis for the claim: SETTLEMENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.172	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$31,200.00
s1777	CRUNCHTIME! INFORMATION SYSTEMS, INC. 129 PORTLAND ST 2ND FLOOR BOSTON, MA 02114	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: IT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.173	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$294.25
s1778	CUMMINGS SEALCOAT & STRIPING 731 SECOND CREEK ROAD SISSONVILLE, WV 25320	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.174	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$840.39
s1156	CURRENCY EXCHANGE BARR MANAGEMENT 6408 N WESTERN AVE. CHICAGO, IL 606450	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred	Basis for the claim: DEMAND LETTER	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.175	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1096	CURTIS LENARD ADDRESS REDACTED	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred 2/18/2018	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.176	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$632.11
s1779	D & J PLUMBING INC PO BOX 375 COMMERCE, GA 30529	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.177	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$13,854.95
s1780	DAKOTA ELECTRIC ASSOCIATION PO BOX 64427 ST PAUL, MN 55164-0427	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.178	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$140.95
s1781	DATE LABEL CORP PO BOX 684 INDIANAPOLIS, IN 46206-0684	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.179	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,034.68
s1782	DAYLIGHT FOODS INC 30200 WHIPPLE RD UNION CITY, CA 94587	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: FOOD/BEVERAGE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.180	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$48.02
s1783	DAYMARK SAFETY SYSTEMS 12836 SOUTH DIXIE HIGHWAY BOWLING GREEN, OH 43402	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.181	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$200,266.44
s1784	DDRM HIGHLAND GROVE LLC PO BOX 534455 DEPT# 405049-21250-30870 ATLANTA, GA 30353-4455	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.182	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1050	DE PARRA TOVAR,JACINTA ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 11/25/2018	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.183	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$258.52
s1785	DEGARMO PLUMBING INC 300 S WASHINGTON STREET JANESVILLE, WI 53548	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.184	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$300,559.56
s1786	DEL AMO FASHION CTR OPERATING CO LLC PO BOX 409657 ACCT 5243HOMEBU ATLANTA, GA 30384-9657	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.185	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$28,821.35
s1787	DELMARVA POWER PO BOX 17000 WILMINGTON, DE 19886	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.186	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$29,378.14
s1788	DEMOOEI, HORMOZ 3810 PASEO PRIMARIO CALABASAS, CA 91302-3056	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.187	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$202.00
s1789	DENTONS US LLP DEPT 3078 CAROL STREAM, IL 60132-3078	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PROFESSIONALS	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.188	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$89.60
s1790	DEPARTMENT OF CONSUMER & BUSINESS SERVICES REVENUE SERV.SECTION PO BOX 14610 SALEM, OR 97309-0445	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Amount of Claim

3.189	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$5,000.00
s1791	DEPARTMENT OF LABOR AND INDUSTRIES PO BOX 34022 SEATTLE, WA 98124-1022	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.190	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$406.50
s1792	DIAMOND SHARP PRO EDGE KNIFE 513 MERCURY LN BREA, CA 92821	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.191	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$150.00
s1793	DINGER'S BACKFLOW SERVICE 11430 PINEHURST DRIVE LAKESIDE, CA 92040	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.192	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$525.00
s1794	DIVERSIFIED UPHOLSTERY 2432 S DUKE AVE FRESNO, CA 93727	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Amount of Claim

3.193	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$410.71
s1795	DIVINITY INVESTMENTS LLC 418 EPIC DR CHAMBERSBURG, PA 70201	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.194	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$544.18
s1796	DOMINION EAST OHIO PO BOX 26785 RICHMOND, VA 23261-6785	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.195	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$14,819.74
s1797	DOMINION ENERGY NORTH CAROLINA PO BOX 26543 RICHMOND, VA 23290-0001	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.196	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,072.70
s1798	DOMINION ENERGY WEST VIRGINIA PO BOX 26783 RICHMOND, VA 23261-6783	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Amount of Claim

3.197	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1098	DONNA E ICE. ADDRESS REDACTED	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred 8/28/2016	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.198	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$89,412.66
s1799	DOWNEY DOLAN HE LLC ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.199	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$24,075.50
s1800	DPI GROUP LLC PO BOX 3377 ATTN: PAT DESANTIS FRESNO, CA 93650	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.200	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$18,508.96
s1801	DUCK DELIVERY PRODUCE INC 8448 NE 33RD DRIVE PORTLAND, OR 97211	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: FOOD/BEVERAGE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.201	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1090	DUE,KASEY ADDRESS REDACTED	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred 1/16/2020	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.202	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$3,037.69
s1802	DUFFY'S AIS LLC 3138 ONEIDA ST SAUQUOIT, NY 13456	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.203	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$7,070.86
s1803	DUKE ENERGY PO BOX 1003 CHARLOTTE, NC 28201-1003	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.204	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,753.54
s1804	DUMONT PRINTING & MAILING PO BOX 12726 FRESNO, CA 93779	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: MARKETING	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.205	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$215,975.16
s1805	DYNAMIC FOODS ALAMO DYNAMIC LLC 1001 EAST 33RD ST LUBBOCK, TX 79404-1899	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: FOOD/BEVERAGE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.206	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$47.70
s1806	EAST COAST FOOD EQUIPMENT 570 INDUSTRIAL DR LEWISBERRY, PA 17339-9534	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.207	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$365.54
s1807	EASTERN FIRE & ALARM TECHNOLOGIES LLC 222 BLUE PRINCE RD BLUEFIELD, WV 24701	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.208	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$68,092.24
s1808	ECOLAB EQUIPMENT CARE 24673 NETWORK PLACE CHICAGO, IL 60673-1246	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.209	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$97,727.23
s1809	ECOLAB INSTITUTIONAL 655 LONE OAK DRIVE BUILDING A1, CREDIT DEPT EAGAN, MN 55121	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.210	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$38,750.04
s1810	ECOLAB PEST ELIMINATION 26252 NETWORK PL CHICAGO, IL 60673-1241	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.211	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$4,841.53
s1811	ECOLAB SAFETY SPECIALTIES 24198 NETWORK PLACE CHICAGO, IL 60673-1241	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.212	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$9,430.00
s1812	EDWIN L HEIM CO 1918 GREENWOOD ST HARRISBURG, PA 17104-2328	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.213	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$5,167.00
s1813	EGT ENTERPRISE INC 2030 UNION ST #207 SAN FRANCISCO, CA 94123	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.214	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$11,708.11
s1814	ELECTRIC MOTOR REPAIR CO 9100 YELLOW BRICK RD STE H ROSEDALE, MD 21237	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.215	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$470.40
s1815	ELECTRO FREEZE OF NOR CAL, LLC 4330 PINELL STREET SACRAMENTO, CA 95838	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.216	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$415.14
s1816	ELLIS COFFEE CO PO BOX 786926 PHILADELPHIA, PA 19178-6926	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: FOOD/BEVERAGE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.217	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,439.97
s1818	ENGIE RESOURCES PO BOX 9001025 LOUISVILLE, KY 40290-1025	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<hr/>			
3.218	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$23,390.54
s1819	ENTERGY PO BOX 8103 BATON ROUGE, LA 70891-8103	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<hr/>			
3.219	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$200.00
s1820	ER REFRIGERATION 638 ARORA WAY SANTA MARIA, CA 93458	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<hr/>			
3.220	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$307.00
s1821	ERIE COUNTY, NEW YORK COMMISSIONER OF FINANCE 503 KENSINGTON AVE BUFFALO, NY 14214	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: BUSINESS LICENSE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.221	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1079	ESQUIVEL,MELISSA ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.222	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$714.89
s1822	ETHAN FISHER DBA FISHER CARPET CARE 588 ADAIR RD PETERSTOWN, WV 24963	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.223	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$500.00
s1823	ETS PLUMBING PO BOX 608 CLOVIS, CA 93613-0608	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.224	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$13,490.34
s1824	EVERSOFT INC PO BOX 92769 LONG BEACH, CA 90809	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.225	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$425.00
s1825	EXCEPTIONALLY CLEAN CARPET 14349 SPRINGFIELD AVE MIDLOTHIAN, IL 60445	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.226	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,650.00
s1826	EXPERT CLEANING SERVICES GONZALO RICARDO SAAVEDRA 3368 COLONEL BROWN CT STOCKTON, CA 95206	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.227	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$7,095.68
s1827	EXPRESS REFRIGERATION INC 4330 PINNELL ST SACRAMENTO, CA 95838	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.228	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,184.00
s1828	FACILITEC WEST PO BOX 6008 SAN PEDRO, CA 90734	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.229	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$206,026.94
s1829	FAIRFIELD GATEWAY LP C/O CROSSPOINT REALTY SERVICES PO BOX 7365 SAN FRANCISCO, CA 94120-7365	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.230	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$38.00
s1830	FAIRFIELD, CALIFORNIA 1000 WEBSTER ST BUSINESS SERVICES FAIRFIELD, CA 94533-4883	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.231	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$24,999.99
s1831	FASHION SQUARE WEST LLC 29355 NORTHWESTERN HWY, STE 301 C/O ARI-EL ENTERPRISES INC SOUTHFIELD, MI 48034	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.232	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$18,546.00
s1832	FILTREX SERVICE GROUP INC 1623 E APACHE STREET TULSA, OK 74106	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.233	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$750.00
s1833	FIRESAFETY PROTECTION SERVICES LLC 718 10TH STREET LAKE CHARLES, LA 70601	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.234	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$9,203.29
s1834	FIRSTENERGY SOLUTIONS CORP MON POWER PO BOX 3615 AKRON, OH 44306-3615	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.235	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$74,727.48
s1835	FISHBOWL INC PO BOX 740513 ATLANTA, GA 30374-0513	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.236	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$250.00
s1836	FLOOR CARE CONCEPTS INC PO BOX 351 MANDEVILLE, LA 70470	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Amount of Claim

3.237	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,478.88
s1837	FLOYD COUNTY, GEORGIA TAX COMMISSIONER 101 WEST 5TH AVE ROME, GA 30161	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: BUSINESS LICENSE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.238	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1073	FOJAS,LOANA ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 11/11/2019	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.239	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$7,546.15
s1838	FOOD EQUIPMENT SERVICE INC OF WILMINGTON 3316A OLD CAPITOL TRAIL WILMINGTON, DE 19808	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.240	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$660.00
s1839	FORWARD JANESVILLE INC 14 S JACKSON ST JANESVILLE, WI 53546	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Amount of Claim

3.241	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1047	FRANCO, MONICA ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 7/2/2020	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.242	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$38,664.00
s1840	FRAYER ENTERPRISES, LLC DAVID FRAYER PO BOX 892220 OKLAHOMA CITY, OK 73189	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.243	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$15,000.00
s2625	FRESH ACQUISITIONS, LLC 2338 N LOOP 1604 W SUITE 350 SAN ANTONIO, TX 78248	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred	Basis for the claim: RELATED PARTY	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.244	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$12,506.86
s1841	FRESNO COUNTY, CALIFORNIA 1730 S MAPLE AVE DEPT OF AGRICULTURE FRESNO, CA 93702	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.245	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$745.78
s1842	FRY'S FIRE PROTECTION LLC PO BOX 3155 WILLIAMSPORT, PA 17701	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.246	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1046	FULLER,MELVIN ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 4/2/2019	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.247	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1043	GALAVIZ,MIGUEL ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 7/22/2016	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.248	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1075	GARCIA,OLIVIA ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 11/10/2019	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.249	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$475.00
s1843	GARDEN GROVE, CALIFORNIA PO BOX 3070 ALARM COORDINATORS GARDEN GROVE, CA 92842	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.250	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,418.78
s1844	GAS SOUTH LLC PO BOX 530552 ATLANTA, GA 30353-0552	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.251	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$5,618.52
s1845	GATEWAY COURTYARD LLC C/O CROSSPOINT REALTY SERVICES PO BOX 7365 SAN FRANCISCO, CA 94120-7365	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.252	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$689.99
s1846	GENE BLACKBURN HEATING & AIR 1104 PANTHEON DRIVE CONWAY, SC 29526	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.253 s1847	Nonpriority creditor's name and mailing address GEORGIA POWER CO 96 ANNEX ATLANTA, GA 30396-0001	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$64,750.88
	Date or dates debt was incurred Various Last 4 digts of account number	Basis for the claim: UTILITIES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<hr/>			
3.254 s1848	Nonpriority creditor's name and mailing address GET FRESH PRODUCE INC 1441 BREWSTER CREEK BLVD BARTLETT, IL 60185	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,559.84
	Date or dates debt was incurred Various Last 4 digts of account number	Basis for the claim: FOOD/BEVERAGE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<hr/>			
3.255 s1849	Nonpriority creditor's name and mailing address GGP MAINE MALL LLC 7846 SOLUTION CENTER C/O THE MAINE MALL CHICAGO, IL 60677-7008	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$212,505.00
	Date or dates debt was incurred Various Last 4 digts of account number	Basis for the claim: RENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<hr/>			
3.256 s1850	Nonpriority creditor's name and mailing address GILLESPIE, J C 799 N TURKEY CREEK RD LEICESTER, NC 28748	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$350.00
	Date or dates debt was incurred Various Last 4 digts of account number	Basis for the claim: GENERAL & ADMINISTRATIVE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.257	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,829.53
s1851	GLENDAL, ARIZONA PO BOX 800 PRIVILEGE TAX SECTION GLENDAL, AZ 85311-0800	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITY	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.258	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,075.00
s1852	GOLDEN GLO CARPET CLEANERS INC 2785 PHILMONT AVE, UNIT E HUNTINGDON, PA 19006	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.259	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$379.04
s1853	GOLDEN STATE EQUIPMENT REPAIR PO BOX 728 ROSEVILLE, CA 95661	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.260	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$40.00
s1854	GOLDEN STATE URGENT CARE PO BOX 744062 ATLANTA, GA 30374-4062	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.261	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$5,073.41
s1855	GOLDEN STATE WATER COMPANY PO BOX 9016 SAN DIMAS, CA 91773-9016	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.262	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1080	GOULD, THOMAS ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.263	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$160,040.00
s1856	GRANITE VILLAGE WEST LP 730 EL CAMINO WAY, SUITE 200 C/O ATHENA PROPERTY MANAGEMENT TUSTIN, CA 92780	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.264	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,309.71
s1857	GREEN HILLS LAWN CARE 2917 W 19TH AVE. #136 KENNEWICK, WA 99337	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.265	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$62,968.50
s1858	GREENBERG TRAUIG, LLP 3333 PIEDMONT ROAD NE SUITE 2500 ATLANTA, GA 30305	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PROFESSIONALS	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.266	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$235,520.06
s1859	GREENFIELD LP ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.267	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$3,992.09
s1860	GREENFIELD, WISCONSIN 7325 WEST FOREST HOME AVE GREENFIELD, WI 53220-0739	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.268	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$12,403.22
s1861	GUARDIAN PO BOX 677458 DALLAS, TX 75267-7458	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: INSURANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.269	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1044	GUIJARRO,MARIA ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 3/8/2017	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.270	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$4,435.90
s1862	GULF COAST PRODUCE DISTRIBUTORS INC PO BOX 203 BILOXI, MS 39533-0203	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: FOOD/BEVERAGE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.271	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$11,090.68
s1863	GULF POWER COMPANY PO BOX 29090 MIAMI, FL 33102-9090	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.272	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$350.00
s1864	GUS PROFESSIONAL CARPET CLEANING LLC 1932 W FOREST HOME AVE MILWAUKEE, WI 53204	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

			Amount of Claim
3.273	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$400.00
s1865	GUSTAVO ALVAREZ VELASQUEZ 146 GOLDEN ROAD PERRIS, CA 92570	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.274	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$800.59
s1866	HANDY HANKS REPAIR SERVICE HENRY A SEIB 852 E GOSHEN AVE FRESNO, CA 93720	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.275	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,000.00
s1867	HANDYMAN EDDIE ADULFO ARAMBULA 4770 SOUTHGATE PARKWAY MYRTLE BEACH, SC 29579	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.276	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$474.75
s1868	HANSON SERVICES LLC 56587 STEPHANIE LN ROCK CREEK, MN 55063	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.277	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$90.00
s1869	HARPER MACHINE & IRON WORKS INC 611 SW BOWENS MILL RD DOUGLAS, GA 31533	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.278	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$400.00
s1870	HARRISON CLARKSBURG, WEST VIRGINIA 330 W MAIN ST HEALTH DEPT CLARKSBURG, WV 26301	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.279	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,682.49
s1872	HAYNES HEATING & COOLING PO BOX 16589 ASHEVILLE, NC 28816	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.280	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$7,097.75
s1873	HAYWARD WATER SYSTEM PO BOX 6004 HAYWARD, CA 94540	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Amount of Claim

3.281	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$604.64
s1874	HAYWARD, CALIFORNIA PO BOX 398258 SAN FRANCISCO, CA 94139	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.282	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$22,306.44
s1875	HAZ HOLDINGS, LLC 25401 CABOT RD, STE 208 LAGUNA HILLS, CA 92653	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.283	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$716.02
s1876	HEDRICK FIRE PROTECTION 13309 CENTRAL AVE CHINO, CA 91710	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.284	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,288.08
s1877	HELEN THOMPSON MEDIA, INC. 18911 HARDY OAK BLVD SUITE#141 SAN ANTONIO, TX 78258	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: MARKETING	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Amount of Claim

3.285	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$344.00
s1878	HEMET, CALIFORNIA 445 E FLORIDA AVE BUSINESS LICENSE HEMET, CA 92543	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.286	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$792.79
s1879	HERITAGE FOOD SERVICE EQUIPMENT INC PO BOX 71595 CHICAGO, IL 60694-1595	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.287	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$303,577.45
s1880	HGGA PROMENADE LP PO BOX 8700 NEWPORT BEACH, CA 92658-8700	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.288	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,362.19
s1881	HIGHLAND, INDIANA 3333 RIDGE ROAD OFFICE OF THE CLERK - TREASURER UTILITIES BILLING BUREAU HIGHLAND, IN 46322	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Amount of Claim

3.289	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$11,477.80
s1882	HILLER PLUMBING HEATING & COOLING CO INC 915 MURFREESBORO PIKE NASHVILLE, TN 37217	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.290	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$369.96
s1883	HOBART SALES & SERVICE - DUNBAR PO BOX 3563 CAROL STREAM, IL 60132-3563	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.291	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$85.00
s1884	HOLT PLUMBING LLC 2608 MURFREESBORO RD STE 100 NASHVILLE, TN 37217	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.292	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$579.00
s1885	HOOD GUYZ 7711 N MILITARY TRAIL SUITE 220 PALM BEACH GARDENS, FL 33410	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.293	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$766.00
s1886	HOODFILTERS.COM	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.294	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$252.98
s1888	HOSKINS ELECTRIC LLC 14837 ELMWOOD DR WOODBIDGE, VA	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.295	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$107,135.09
s1889	HPC STONECREEK INVESTORS, LP 18321 VENTURA BLVD SUITE 980 TARZANA, CA 91356	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.296	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,800.00
s1890	HUERTA LANDSCAPE & MAINTENANCE PO BOX 1417 SAN MARCOS, CA 92079	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.297	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$329.75
s1891	IAM MOWING 700 BROOK HOLLOW DR CONROE, TX 77385	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.298	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$4,348.52
s1892	ICEE COMPANY PO BOX 515723 LOS ANGELES, CA 90051-5203	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: FOOD/BEVERAGE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.299	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$842.65
s1893	INDFOSS REFRIGERATION INC 2102 THRASHER CT UNION CITY, CA 94587	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.300	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$16,500.00
s1894	INK LINK MARKETING LLC 6073 NW 167 ST. C18 HIALEAH, FL 33015	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: MARKETING	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.301	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$184,953.39
s1895	IRC RETAIL CENTERS 75 REMITTANCE DRIVE DEPT 3128 LEASE#1994 CHICAGO, IL 60675-3128	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.302	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$955.00
s1896	IRRI-CARE PLUMBING AND BACKFLOW TESTING INC 415 GREENDALE DR LA PUENTE, CA 91746	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.303	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$450.00
s1897	ISAIAS RODRIGUEZ HOOD CLEANING 1513 SUNSET ST BARSTOW, CA 92311	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.304	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,504.37
s1503	J AMROGI FOOD DISTRIBUTION, INC ADDRESS REDACTED	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred	Basis for the claim: SETTLEMENT	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.305	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$17,748.89
s1898	J BERRY CO INC 9233 LAKEWOOD BLVD DOWNEY, CA 90240	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.306	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,625.66
s1899	JAC SERVICES LLC 107 ELKS LODGE LANE SUMMERVILLE, SC 29483	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.307	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,449.07
s1900	JANESVILLE MUNICIPAL UTILITIES PO BOX 5005 JANESVILLE, WI 53547-5005	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.308	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$183.00
s1901	JANESVILLE, WISCONSIN CLERK-TREASURERS OFFICE PO BOX 5005 JANESVILLE, WI 53547-5005	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

			Amount of Claim
3.309	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$28,383.35
s2612	JBP KIRKLAND LLC MICHAEL R. JONES 1250 PACIFIC AVENUE, SUITE 100 TACOMA, WA 98402	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred	Basis for the claim: PROPERTY TAX DUE TO LANDLORD	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.310	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$220,779.00
s1902	JBP PROPERTIES LLC C/O BANK OF THE WEST 1250 PACIFIC AVENUE, SUITE 100 TACOMA, WA 98402	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.311	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$295.00
s1903	JCR CONSTRUCTION LLC 4277 WEATHERS ST NE SALEM, OR 97301	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.312	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$5,744.49
s1486	JENNIFER HERNANDEZ ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred	Basis for the claim: LITIGATION-WAGE&HOUR	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.313	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,200.00
s1904	JHM SIGNS 1593 SPRINGTOWN ROAD ALPHA, NJ 08865	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.314	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$485.00
s1905	JK FOOD EQUIPMENT 6 BROOKGREEN PL ASHEVILLE, NC 28804	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.315	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$406.75
s1906	JNB SIGNS INC 1221 VENTURE DRIVE, SUITE #1 JANESVILLE, WI 53546	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.316	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$7.41
s1907	JO STARRATT 7690 VETERANS HWY SCOTTSDALE, KY 42164	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.317	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$7,860.06
s1908	JORGENSEN & SONS INC. PO BOX 398655 SAN FRANCISCO, CA 94139-8655	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.318	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$817.53
s1909	JORGENSEN CO PO BOX 398655 SAN FRANCISCO, CA 94139-8655	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.319	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1097	JOSEPH GRIGSBY ADDRESS REDACTED	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred 12/30/2016	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.320	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$22,897.26
s1910	JUST ENERGY SOLUTIONS INC. PO BOX 101141 PASADENA, CA 91189-1141	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.321	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$782.65
s1911	KANAWHA CHARLESTON, WEST VIRGINIA PO BOX 927 HEALTH DEPT CHARLESTON, WV 25323	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<hr/>			
3.322	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$17,216.78
s1912	KATSIROUBAS PRODUCE 40 NEW MARKET SQUARE BOSTON, MA 02118	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: FOOD/BEVERAGE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<hr/>			
3.323	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,593.91
s1913	KENNEWICK, WASHINGTON FALSE ALARM REDUCTION PROGRAM PO BOX 3613 SEATTLE, WA 98124-3613	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<hr/>			
3.324	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,147.25
s1914	KENRICH ELECTRONICS, INC 6820 N W 63RD ST BETHANY, OK 73008	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<hr/>			

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.325	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$4,711.11
s1915	KERN COUNTY, CALIFORNIA 1115 TRUXTUN AVE 2ND FL TAX COLLECTOR BAKERSFIELD, CA 93301	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.326	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1440	KIMCO OF PENNSYLVANIA TRUST ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred	Basis for the claim: LITIGATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.327	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$20,989.22
s1916	KIMCO REALTY CORP PO BOX 62045 NEWARK, NJ 07101	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.328	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$149,478.06
s1917	KIMCO REALTY CORPORATION PO BOX 62045 LEASE ID SPAH0193A-LOLD/CO00 NEWARK, NJ 07101	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Amount of Claim

3.329	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,237.00
s1918	KING COUNTY, WASHINGTON 500 FOURTH AVE - RM 600 TREASURY SEATTLE, WA 98104-2340	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.330	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,803.46
s1919	KINNETT PLUMBING LLC 5064 ANCHORSTONE DR WOODBIDGE, VA 22192	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.331	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$223,920.84
s1920	KIR COVINA LP PO BOX 62045 NEWARK, NJ 07101	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.332	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$205,472.36
s1921	KIR SMOKETOWN STATION LP P O.BOX 62045 NEWARK, NJ 07101	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

			Amount of Claim
3.333	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$595.45
s1922	KOOL TEMP LLC 460 BUCKEYE LANE NACHES, WA 98908	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.334	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$10,028.41
s1923	LAFOLLETTE, JOHNSON, DEHAAS, FESLER & AMES 865 SOUTH FIGUEROA STREET 32ND FLOOR LOS ANGELES, CA 90017-5431	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digts of account number	Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.335	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$764.05
s1924	LAKE CHARLES, LOUISIANA PO BOX 3706 LAKE CHARLES, LA 70602-3706	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digts of account number	Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.336	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,645.20
s1926	LAKELAND FACILITY SERVICES LLC 826 HIGHWAY 65 ROBERTS, WI 54023	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.337	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$256.61
s1927	LAKEWOOD WATER DISTRICT PO BOX 99729 TACOMA, WA 98499	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.338	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$373.97
s1928	LAKEWOOD, CALIFORNIA PO BOX 220 5050 CLARK AVE LAKEWOOD, CA 90714	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.339	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$128,800.26
s1929	LANCASTER CENTER EAST LLC C/O NORTH PACIFIC MANAGEMENT, INC. 7200 NE 41ST STREET, SUITE 100 VANCOUVER, WA 98662	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.340	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$4,529.52
s1930	LANE COUNTY, OREGON 151 WEST 7TH AVE STE 430 ENVIRONMENTAL HEALTH DEPT EUGENE, OR 97401	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.341	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$46.20
s1931	LAPOINTE LAW, P C 1200 SHERMER ROAD, SUITE 310 NORTHBROOK, IL 60062	<p>Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>	
	Date or dates debt was incurred Various	Basis for the claim: PROFESSIONALS	
	Last 4 digts of account number	<p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.342	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$780.46
s1932	LARSON RECORDS MANAGEMENT 2550 WALNUT ST ROSEVILLE, MN 55113	<p>Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digts of account number	<p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.343	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$11,734.20
s1933	LERS SERGIO LEON RAMIREZ 415 N HENRY CHAVEZ CT SUITE A PO BOX 7410-2935 SAN LUIS, AZ 85349	<p>Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digts of account number	<p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.344	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$52,108.84
s1934	LIBERTY MUTUAL INSURANCE PO BOX 91012 CHICAGO, IL 60680-1110	<p>Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>	
	Date or dates debt was incurred Various	Basis for the claim: INSURANCE	
	Last 4 digts of account number	<p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.345	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$50.00
s1935	LINLEY STRICKER 6636 S.LAFAYETTE ST CENTENNIAL, CO 80121	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.346	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$44,503.83
s1936	LIQUID ENVIRONMENTAL SOLUTIONS PO BOX 733372 DALLAS, TX 75373-3372	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.347	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1054	LIZAMA,EMMA ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 11/9/2016	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.348	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1067	LONGWELL, CHERYL ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 7/17/2017	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.349	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$38,021.34
s1937	LOS ANGELES COUNTY, CALIFORNIA 225 NORTH HILL ST, ROOM 122 DEPT OF TREASURER & TAX COLLECTOR LOS ANGELES, CA 90051-4818	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.350	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$74,234.50
s1938	LOS ANGELES DEPARTMENT OF WATER & POWER PO BOX 30808 LOS ANGELES, CA 90030-0808	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.351	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$6,683.24
s1939	LOS ANGELES, CALIFORNIA PO BOX 30879 FALSE ALARMS LOS ANGELES, CA 90030-0879	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.352	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$91,252.56
s1940	LOUIS J DIMUZIO 196 CANTERING HILLS LN SUMMERVILLE, SC 29483	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.353	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1444	LOURDES CONTRERAS ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred	Basis for the claim: AGENCY DISCRIMINATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.354	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$6,857.19
s1941	LOWER PAXTON TOWNSHIP AUTHORITY 425 PRINCE STREET HARRISBURG, PA 17109-3020	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.355	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$600.00
s1942	LR&L - LEAF REMOVAL & LANDSCAPE 7859 EAST BOYD RD WOODLAWN, IL 62898	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.356	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$239,306.40
s1943	LUCKY MONTEBELLO SHOPPING CENT 217 EAST GARVEY AVE C/O LISA LAU & CO MONTEREY PARK, CA 91755	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.357	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1069	LUNA COLIMA, YESENIA ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 9/1/2019	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.358	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$202,850.86
s1944	MACERICH LAKEWOOD LP PO BOX 849464 LOS ANGELES, CA 90084-9464	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.359	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$369.67
s1945	MADISON SUBURBAN UTILITY DIST PO BOX 175 MADISON, TN 37116-0175	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.360	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,722.50
s1946	MAGNUM MECHANICAL GROUP 22 ENOCHS WAY FLETCHER, NC 28732	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.361	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1081	MALDONADO,DALILA ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.362	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$17,698.49
s1947	MANCHESTER, CONNECTICUT PO BOX 191 COLLECTOR OF REVENUE MANCHESTER, CT 06045-0191	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.363	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$4,040.28
s1948	MANCILL, INC 3201 MR JOE WHITE AVENUE MYRTLE BEACH, SC 29577	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.364	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$20,361.76
s1949	MARICOPA COUNTY, ARIZONA 501 N 44TH ST., STE #200 ADMINISTRATIVE SERVICES PHOENIX, AZ 85008	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Amount of Claim

3.365 s1950	Nonpriority creditor's name and mailing address MARION COUNTY, OREGON PO BOX 14500 ALARM ADMINISTRATION SALEM, OR 97309	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$4,386.18
	Date or dates debt was incurred Various Last 4 digts of account number	Basis for the claim: PERMIT/FEE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.366 s1951	Nonpriority creditor's name and mailing address MARK FORHAN 507 WOODMERE XING SAINT CHARLES, MO 63303	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$50.00
	Date or dates debt was incurred Various Last 4 digts of account number	Basis for the claim: GENERAL & ADMINISTRATIVE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.367 s1057	Nonpriority creditor's name and mailing address MARROQUIN,JORGE ADDRESS REDACTED	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	UNKNOWN
	Date or dates debt was incurred 5/13/2017 Last 4 digts of account number	Basis for the claim: WORKERS COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.368 s1952	Nonpriority creditor's name and mailing address MARTIN ESQUIVIAS ORTEGA DBA MARTIN ESQUIVIAS GARDENING SERVICES 526 FIG STREET BAKERSFIELD, CA 93304	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$3,520.00
	Date or dates debt was incurred Various Last 4 digts of account number	Basis for the claim: REPAIRS & MAINTENANCE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.369	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$3,600.00
s1953	MARTINEZ LANDSCAPING PO BOX 405 SANTA MARIA, CA 93456	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.370	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1037	MARTINEZ, CECILIA ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 7/29/2017	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.371	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1077	MARTINEZ, MAGDALENA ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 3/24/2017	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.372	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$671.51
s1954	MASTERCLEAN 302 BERKSHIRE RD MECHANICSBURG, PA 17055	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Amount of Claim

3.373	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$0.01
s1955	MCCARRON & DIESS CLIENT TRUST ACCOUNT 4530 WISCONSIN AVE, N W SUITE 301 WASHINGTON, DC 20016	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PROFESSIONALS	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.374	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$8,713.59
s1956	MCCARTNEY PRODUCE PO BOX 219 PARIS, TN 38242-0219	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: FOOD/BEVERAGE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.375	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$196.00
s1957	MEDEXPRESS URGENT CARE, INC WEST VIRGINIA PO BOX 7959 BELFAST, ME 04915-7900	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.376	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$157.00
s1958	MEDFORD, OREGON 200 S IVY ST, 2ND FLOOR MEDFORD, OR 97501	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.377	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,103.81
s1450	MELODY JOHNSON ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred	Basis for the claim: LITIGATION-WAGE&HOUR	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.378	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1051	MENA,REINA ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 10/10/2019	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.379	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1076	MENDOZA,ERICK ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 10/5/2019	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.380	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$4,745.90
s1959	MENTO PRODUCE 946 SPENCER ST SYRACUSE, NY 13204	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: FOOD/BEVERAGE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.381	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$14,134.39
s1960	MERCER COUNTY, WEST VIRGINIA 1501 WEST MAIN ST - SUITE 120 TREASURER OFFICE PRINCETON, WV 24740-2600	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.382	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$10,265.26
s1961	MERCHANT SERVICES--WORLDPAY HOLDING, LLC MAIL DROP 1GH2X2 8500 GOVERNORS HILL DR SYMME TOWNSHIP, OH 45249-1384	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.383	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$4,327.69
s1963	MET ED PO BOX 3687 AKRON, OH 44309-3687	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.384	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,980.49
s1964	METRO WATER SERVICES PO BOX 305225 NASHVILLE, TN 37230-5225	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.385	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$50.00
s1965	METROPOLITAN GOVERNMENT-ALARM REGISTRATION PO BOX 196321 NASHVILLE, TN 37219	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.386	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,200.00
s1966	MGA PRO PAINTERS LLC 5315 E BROADWAY RD APT 1074 MESA, AZ 85206	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.387	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$684.00
s1967	MICHAEL SPEAR 2720 W BELMONT AVE CHICAGO, IL 60618	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.388	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$156,210.28
s1968	MIDTOWN NATIONAL GROUP LP 415 S CEDROS AVENUE, SUITE 240 SOLANA BEACH, CA 92075	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.389	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$4,683.60
s1969	MILWAUKEE, WISCONSIN PO BOX 3268 WATER WORKS MILWAUKEE, WI 53201-3268	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.390	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$19,776.25
s1167	MINNESOTA DEPARTMENT OF REVENUE COLLECTION DIVISION ADDRESS UNAVAILABLE AT TIME OF FILING	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 12/14/2020	Basis for the claim: DEMAND LETTER	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.391	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1056	MIRANDA,ANTONITTE ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 2/12/2018	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.392	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1095	MIRZETA HASANOVIC ADDRESS REDACTED	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred 3/23/2018	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.393	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,529.55
s1970	MONIQUE BUCIO DBA BUCIO'S UPHOLSTERY 24479 VALLE DEL ORO UNIT 203 NEWHALL, CA 91321	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.394	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$358.00
s1971	MONTEBELLO, CALIFORNIA ALARM UNIT PO BOX 6112 CONCORD, CA 94524	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.395	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$8,443.35
s1972	MOOD MEDIA - MUZAK LLC PO BOX 71070 CHARLOTTE, NC 28272-1070	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.396	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1041	MORALES,JOSE ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 3/27/2018	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.397	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,000.00
s1973	MORENO VALLEY MALL HOLDING LLC 22500 TOWN CIRCLE, SUITE 1206 MORENO VALLEY, CA 92553	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.398	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$4,566.89
s1974	MOUNTAINEER GAS COMPANY PO BOX 580211 CHARLOTTE, NC 28258-0211	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.399	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$352.12
s1975	MR FIX-IT PROFESSIONAL HANDYMAN SERVICES 2076 WHITE LN #127 BAKERSFIELD, CA 93304	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.400	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$78,708.46
s1976	MSCI 2007-IQ14 NORTH METRO PARKWAY, LLC C/O WILSON PROPERTY SERVICES, INC 8120 EAST CACTUS ROAD, SUITE 300 SCOTTSDALE, AZ 85260	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.401	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$22,500.00
s1977	MSP ALAMO ENTERPRISES, LLC 815-A BRAZOS ST #242 AUSTIN, TX 78701	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.402	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$666.52
s1978	MT VERNON GLASS COMPANY INC PO BOX 644 MT VERNON, IL 62864	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.403	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$8,842.27
s1979	MULTNOMAH COUNTY, OREGON 847 NE 19TH AVE STE 350 HEALTH DEPT PORTLAND, OR 97232	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.404	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$104.40
s1980	MURILLO BERMUDEZ MANUEL ADDRESS REDACTED	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: EMPLOYEE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.405	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$16,110.34
s1982	NASHVILLE ELECTRIC SERVICE PO BOX 305099 NASHVILLE, TN 37230-5099	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.406	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$8,151.51
s1983	NATIONAL FUEL GAS DISTRIBUTION CO PO BOX 371835 PITTSBURGH, PA 15250-7835	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.407	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$3,100.00
s1151	NATIONWIDE ELEC CONSTRUCTION & MAINTENANCE DAVID BLOOM 130 JEFFERSON STREET, SUITE 350 CHICAGO, IL 60661	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 1/7/2020	Basis for the claim: DEMAND LETTER	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.408	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$5,385.92
s1984	NCR CORP PO BOX 198755 ATLANTA, GA 30384-8755	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.409	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$298,030.70
s1985	NF PLANT ENTERPRISES LP 6222 WILSHIRE BLVD STE 400 C/O DECRON MANAGEMENT CORP LOS ANGELES, CA 90048	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.410	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,200.00
s1986	NILES STREET FIREWOOD 8 FAIRFAX RD BAKERSFIELD, CA 93307	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.411	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$11,838.34
s1987	NIPSCO PO BOX 13007 MERRILLVILLE, IN 46411-3007	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.412	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$231.03
s1988	NORTH MYRTLE BEACH, SOUTH CAROLINA 1018 - 2ND AVE S N MYRTLE BEACH, SC 29582	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.413	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$40.00
s1989	NORTHERN VIRGINIA CARENOW PO BOX 744033 ATLANTA, GA 30374-4033	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.414	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,752.16
s1990	NORTHERN VIRGINIA ELECTRIC CO PO BOX 34795 ALEXANDRIA, VA 22334-0795	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.415	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$5,484.50
s1991	NOSSAMAN LLP 777 SOUTH FIGUEROA STREET 34TH FLOOR LOS ANGELES, CA 90017	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PROFESSIONALS	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.416	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$36,337.44
s1992	NUCO2 INC PO BOX 9011 STUART, FL 34995-9011	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.417	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$33,480.71
s1993	NW NATURAL PO BOX 6017 PORTLAND, OR 97228-6017	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.418	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$6,282.56
s1994	NYSEG PO BOX 847812 BOSTON, MA 02284-7812	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.419	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$187.00
s1995	OCCUPATIONAL HEALTH CENTERS OF CALIFORNIA PO BOX 3700 RANCHO CUCAMONGA, CA 91729-3700	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.420	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$281.00
s1996	OCCUPATIONAL HEALTH CENTERS OF ILLINOIS, P C PO BOX 488 LOMBARD, IL 60148-0488	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Amount of Claim

3.421	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$325,923.95
s1997	OGLETREE DEAKINS NASH SMOAK & STEWART PC PO BOX 89 COLUMBIA, SC 29202	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PROFESSIONALS	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.422	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1088	OLIVARES,ISMAEL ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 11/1/2017	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.423	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$550.00
s1998	OMEGA SERVICES LLC DBA OMEGA CARPET CLEANING 444 E ROOSEVELT RD #138 LOMBARD, IL 60148	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.424	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$10,302.04
s1999	ORANGE COUNTY, CALIFORNIA 1241 E DYER RD STE 120 ENVIRONMENTAL HEALTH SANTA ANA, CA 92705-5611	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Amount of Claim

3.425	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1045	ORNELAS,ELSA ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 12/10/2017	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.426	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$7,069.83
s2000	PACE ELECTRICAL & GENERATOR SERVICES 105 CARSON DRIVE BEAR, DE 19701	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.427	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$3,517.70
s2001	PACE WATER SYSTEMS INC 4401 WOODBINE RD PACE, FL 32571	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.428	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$246,517.56
s2002	PACIFIC GAS & ELECTRIC COMPANY BOX 997300 SACRAMENTO, CA 95899-7300	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.429	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$19,175.74
s2003	PACIFIC POWER PO BOX 26000 PORTLAND, OR 97256-0001	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.430	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$185,584.25
s2004	PALOMAR RETAIL CENTER-RENT C/O PARKSTONE CO UTILITIES 3033 5TH AVE, #335 SAN DIEGO, CA 92103	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.431	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$42.20
s2005	PAPER SYSTEMS INC 4403 SOLUTIONS CENTER LBX #774403 CHICAGO, IL 60677-4004	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.432	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1062	PASTOR PACHECO,GISELA ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 6/22/2019	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.433	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$158,008.50
s2006	PAT DESANTIS PO BOX 3377 FRESNO, CA 93650	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.434	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$3,076.87
s2008	PENN JERSEY PAPER CO 9355 BLUE GRASS ROAD PHILADELPHIA, PA 19114	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.435	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$956.00
s2009	PENNSYLVANIA TOURISM SIGNING TRUST 2300 VARTAN WAY STE 240 HARRISBURG, PA 17110	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: MARKETING	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.436	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$22,038.75
s2010	PEOPLEREADY INC PO BOX 676412 DALLAS, TX 75267-6412	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.437	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$13,802.36
s2011	PEOPLES GAS PO BOX 19100 GREEN BAY, WI 54307-9100	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.438	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,529.14
s2012	PHOENIX WHOLESALE FOOD SERVICE PO BOX 707 FOREST PARK, GA 30298-0707	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: FOOD/BEVERAGE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.439	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$120.00
s2013	PICAYUNE CITY, MISSISSIPPI 200 HWY 11 S PICAYUNE, MS 39466	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.440	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$5,254.35
s2014	PIEDMONT NATURAL GAS CO PO BOX 1246 CHARLOTTE, NC 28201-1246	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.441	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$18,652.98
s2015	PIERCE COUNTY SEWER PO BOX 11620 TACOMA, WA 98411-6620	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.442	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$554.22
s2017	PILOT POWER GROUP LLC 8910 UNIVERSITY CENTER LANE SUITE 520 SAN DIEGO, CA 92122	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.443	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,977.60
s2018	PINE TREE FOOD EQUIPMENT INC 175 LEWISTON RD GRAY, ME 04039	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.444	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$3,610.00
s2019	PISTOL'S PLUMBING & MAINTENANCE INC PO BOX 12604 LAKE CHARLES, LA 70612-2604	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.445	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$3,484.80
s2020	PLANSOURCE BENEFITS ADMINISTRATION, INC PO BOX 932330 ATLANTA, GA 31193-2330	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.446	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$7,632.40
s2021	PLAYERLYNC, LLC 5690 DTC BLVD, SUITE 450E GREENWOOD VILLAGE, CO 80111	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.447	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$247,542.58
s2022	PLAZA 205 GARP LLC REF NO 614 PO BOX 843708 LOS ANGELES, CA 90084-3708	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.448	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1158	POCONO PRODUCE CO., INC. (VENDOR) POCONO PRO FOODS PO BOX 669 2504 CHIPPERFIELD DRIVE EAST STROUDBURG, PA 18301	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 9.11.2020	Basis for the claim: DEMAND LETTER	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.449	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$217,013.11
s2023	POCONO PROFOODS PO BOX 669 STROUDSBURG, PA 18360	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: FOOD/BEVERAGE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.450	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$43,477.34
s2024	PORTLAND GENERAL ELECTRIC PO BOX 4438 PORTLAND, OR 97208-4438	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.451	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$4,459.85
s2025	PORTLAND MECHANICAL CONTRACTORS GROUP 2000 SE HANNA HARVESTER DR MILWAUKIE, OR 97222	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.452	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$27,236.73
s2026	PPL ELECTRIC UTILITIES PO BOX 25222 LEHIGH VALLEY, PA 18002-5222	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.453	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$6,082.50
s2027	PREFERRED PLUMBING & DRAIN 503 BANGS AVE STE #H MODESTO, CA 95356	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.454	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$3,330.00
s2028	PREMIER SIGN INSTALLATIONS 7551 CARMELO AVENUE TRACY, CA 95304	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.455	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1053	PRESSLEY,EDNA ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 1/2/2018	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.456	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$4,274.20
s2029	PRINCE WILLIAM COUNTY SERVICE AUTHORITY PO BOX 71062 CHARLOTTE, NC 28272-1062	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.457	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$221,761.78
s2030	PRINCIPAL LIFE INSURANCE CO PROPERTY 027510 PO BOX 310300 DES MOINES, IA 50331-0300	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.458	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$31,726.80
s2031	PROFESSIONAL REFRIGERATION & MAINTENANCE SVC LLC 2105 GREENSLOPE TRAIL NE HUNTSVILLE, AL 35811	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.459	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$39,994.23
s2032	PROTECTION ONE PO BOX 872987 KANSAS CITY, MO 64187-2987	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.460	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$31,935.36
s2033	PRU/DESERT CROSSING I LLC PO BOX 730214 C/O UCR ASSET SERVICES DALLAS, TX 75373-0214	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Amount of Claim

3.461	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,442.28
s2034	PSNC ENERGY PO BOX 100256 COLUMBIA, SC 29202-3256	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.462	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$4,829.02
s2035	PUGET SOUND ENERGY PO BOX 91269 BOT-01H BELLEVUE, WA 98009-9269	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.463	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,069.80
s2036	PURCELL ELECTRIC COMPANY INC 106 W MAIN ST SALEM, IL 62881	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.464	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$3,396.10
s2037	PYE-BARKER FIRE & SAFETY LLC PO BOX 714812 CINCINNATI, OH 45271	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

			Amount of Claim
3.465	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,400.00
s2038	QUALITY LAWN CARE 4759 BLACKS BLUFF RD ROME, GA 30161	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.466	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,985.71
s2039	QUALITY REFRIGERATION INC - RICHFIELD 6237 PENN AVE SOUTH STE 100 RICHFIELD, MN 55423	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.467	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1093	QUINTIN,JOHN ADDRESS REDACTED	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred 3/8/2020	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.468	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$150.00
s2040	RAPID LOCKSMITH SOLUTIONS LTD 505 COLIMA DR TOLEDO, OH 43609	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

			Amount of Claim
3.469	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1094	RAULS,HELEN ADDRESS REDACTED	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.470	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$950.88
s2041	RAYBURN ELECTRIC COMPANY 2 DUDE STREET NW ROME, GA 30165	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.471	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$189,517.92
s2042	RB RIVERGATE LLC PO BOX 930357 ATLANTA, GA 31193-0357	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.472	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,995.00
s2043	READY CONSTRUCTION LLC PO BOX 2081 WINTERSVILLE, OH 43953	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.473	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$982.75
s2044	READY ROOTER & CHAPMAN PLUMBING 90557 LINK RD EUGENE, OR 97402	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.474	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$73,140.72
s2045	REALM PENNANT RETAIL PARTNERS, LLC C/O ARCADIA MANAGEMENT GROUP PO BOX 10 SCOTTSDALE, AZ 85252-0010	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.475	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$173,946.55
s2046	REALTY INCOME CORPORATION 11995 EL CAMINO REAL SAN DIEGO, CA 92130	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.476	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$239,779.55
s2047	REALTY INCOME ILLINOIS PROPERTIES 4 LLC PO BOX 842428 LOS ANGELES, CA 90084-2428	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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			Amount of Claim
3.477	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$15,247.59
s2613	REALTY INCOME TEXAS PROPERTIES 1 LLC. 11995 EL CAMINO REAL SAN DIEGO, CA 92130	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred	Basis for the claim: PROPERTY TAX DUE TO LANDLORD	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.478	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$3,215.00
s2048	RED GROOMS PAINTING 1982 CENTRAL AVENUE SUMMERVILLE, SC 29483	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.479	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,175.00
s2049	RED'S PAINTING 1982 CENTRAL AVENUE SUMMERVILLE, SC 29483	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.480	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$6,210.55
s2050	REFRIGERATION PLUS LLC 874 PIKES PEAK DRIVE WEST RICHARD, WA 99353	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.481	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$528.32
s2051	REGIONS BANK 1900 5TH AVE N ATTN: DEBBY STEWART - ALBH12302B BIRMINGHAM, AL 35203	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.482	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1411	REINA GONZALEZ ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred	Basis for the claim: LITIGATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.483	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$238,475.12
s2052	RETAIL PROPERTIES OF AMERICA INC 13068 COLLECTIONS CENTER DR RPAI US MANAGEMENT LLC CHICAGO, IL 60693	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.484	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1059	REYES TORRES,SAMUEL ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 3/28/2019	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.485	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1063	REYES,SAMUEL ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 6/15/2019	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.486	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,520.00
s2053	REYNALDO CARPET AND UPHOLSTERY STEAM CLEANING TWO POWERS CORPORATION 395 SYLVIA AVE MILPITAS, CA 95035	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.487	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$7,345.46
s2054	RIALTO, CALIFORNIA PO BOX 845083 ALARM PROGRAM LOS ANGELES, CA 90084	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.488	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$700.00
s2055	RICKS SEPTIC SERVICE LLC 1977 HE JOHNSON RD BOWLING GREEN, KY 42103	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.489	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$23,573.12
s2056	RIVERSIDE COUNTY, CALIFORNIA PO BOX 12005 RIVERSIDE CTY TREASURER RIVERSIDE, CA 92502-2205	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.490	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$4,370.84
s2058	ROBERTA A BOMAN 2119 BURR COURT SANTA CRUZ, CA 95062	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.491	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$52,450.08
s2057	ROBERTA A BOMAN 2119 BURR CT SANTA CRUZ, CA 95062	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.492	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1058	RODRIGUEZ,TRINIDAD M ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 3/21/2018	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.493	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$408.10
s2059	ROGER ANTLE JR 1650 NOAH BLEDSOE RD SMITHS GROVE, KY 42171	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.494	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$847.25
s2060	ROME, GEORGIA PO BOX 1711 ROME, GA 30162-1711	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.495	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1040	ROMERO,FABIOLA ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 10/27/2016	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.496	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$964.00
s2061	RONNIE LEE VICKERS DBA RON'S CARPET CLEANING 81 GOLDEN LN YAKIMA, WA 98908	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.497	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,997.16
s2062	ROOTER 2000 PO BOX 40111 MESA, AZ 85274	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.498	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,112.50
s2063	ROROMAN PLUMBING PO BOX 1249 VACAVILLE, CA 95696	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.499	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$50.00
s2064	ROSS W DETWILER 44250 MERCED RD HEMET, CA 92544	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.500	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$9,600.29
s2065	ROSSMAN PLUMBING 12523 LIMONITE AVE, STE 440-413 EASTVALE, CA 91752	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.501	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$516.00
s2067	ROTO ROOTER - CA 1708 ENTERPRISE DR PO BOX 2827 FAIRFIELD, CA 94533	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.502	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$220.00
s2068	ROTO ROOTER - EAU CLAIRE PO BOX 587 EAU CLAIRE, WI 54702	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.503	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,753.46
s2069	ROTO ROOTER - TRI-CITIES & WALLA WALLA 8524 W GAGE BLVD A-299 KENNEWICK, WA 99336	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.504	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,926.23
s2070	ROTO ROOTER YAKIMA PO BOX 819 BUSHNELL PLUMBING YAKIMA, WA 98907	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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		Amount of Claim
3.505	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: \$4,514.51
s2066	ROTO ROOTER 5672 COLLECTIONS CENTER DR CHICAGO, IL 60693	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.506	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: \$400.00
s2072	ROY'S PLUMBING INC 140 COOPER AVENUE TONAWANDA, NY 14150	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.507	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: \$12,517.88
s1163	ROYAL CUP COFFEE (VENDOR) THE COLONNADE STE 800, 9901 IH 10 WEST SAN ANTONIO, TX 78230	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed
	Date or dates debt was incurred 12/29/2020	Basis for the claim: DEMAND LETTER
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.508	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: \$12,517.88
s1169	ROYAL CUP COFFEE FILE NUMBER: 4261-20 PENNY K HAVVESHAW EINSTEIN & HAVVESHAW P C THE COLONNADE SUITE 800, 9901 IH 10 WEST SAN ANTONIO, TX 78230	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed
	Date or dates debt was incurred	Basis for the claim: DEMAND LETTER
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Amount of Claim

3.509	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$666.49
s2071	ROYAL CUP INC PO BOX 841000 DALLAS, TX 75284-1000	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: FOOD/BEVERAGE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.510	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1061	RUANO,MIRNA ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 2/9/2020	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.511	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1036	RUIZ,LEINET ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 2/13/2019	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.512	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1441	RUSSELL WILLIAMS ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred	Basis for the claim: AGENCY DISCRIMINATION	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Amount of Claim

3.513	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,159,192.35
s2073	SALADINO'S INC PO BOX 12266 FRESNO, CA 93777-2266	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: FOOD/BEVERAGE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.514	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1055	SALCEDO, JESUS ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 11/9/2016	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.515	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1066	SALGADO, SONIA ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 9/13/2016	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.516	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$86,488.84
s2074	SAN BERNARDINO COUNTY, CALIFORNIA 268 W HOSPITALITY LN, 1ST FLOOR SBC TAX COLLECTOR SAN BERNARDINO, CA 92415	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Amount of Claim

3.517	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$9,472.34
s2075	SAN DIEGO COUNTY, CALIFORNIA 1600 PACIFIC HIGHWAY ROOM 162 SAN DIEGO, CA 92101	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.518	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$54,185.19
s2076	SAN DIEGO GAS & ELECTRIC COMPANY PO BOX 25111 SANTA ANA, CA 92799-5111	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.519	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$310.00
s2077	SAN DIEGO, CALIFORNIA PO BOX 121431 PERMITS & LICENSING, MS 735 SAN DIEGO, CA 92112	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.520	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$425.00
s2078	SAN JOAQUIN COUNTY, CALIFORNIA 1868 E HAZELTON AVE ENVIRONMENTAL HEALTH DEPT STOCKTON, CA 95205	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: LICENSE/FEE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.521	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,695.80
s2079	SAN JOSE WATER COMPANY 110 W TAYLOR ST SAN JOSE, CA 95110-2131	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.522	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,844.95
s2080	SAN JOSE, CALIFORNIA PO BOX 39000 BUREAU OF FIRE PREVENTION - DEPT 34347 SAN FRANCISCO, CA 94139	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.523	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1064	SANDOVAL, PAULA ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 2/20/2020	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.524	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1072	SANDOVAL, VICTOR ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 7/14/2019	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.525	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$4,842.00
s2081	SANDY ALEXANDER, INC. DBA DINETEC 200 ENTIN ROAD CLIFTON, NJ 07014	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.526	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$36.14
s2082	SANTA ANA, CALIFORNIA 20 CIVIC CENTER PLAZA TREASURY & CUSTOMER SERVICE SANTA ANA, CA 92701	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.527	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$48.60
s2083	SANTA BARBARA COUNTY EHS/CUPA 2125 S CENTERPOINTE PKWY RM#333 SANTA MARIA, CA 93455-1340	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.528	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$6,269.45
s2084	SANTA CLARA COUNTY, CALIFORNIA 70 WEST HEDDING ST EAST WING, 6TH FLOOR SAN JOSE, CA 95110-1767	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.529	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$28.80
s2085	SANTA MARIA, CALIFORNIA 110 EAST COOK ST RM 5 SANTA MARIA, CA 93454-5190	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.530	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$750.60
s2086	SANTA ROSA COUNTY, FLORIDA 6495 CAROLINE ST STE E TAX COLLECTOR MILTON, FL 32570	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.531	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,322.31
s2087	SANTEE COOPER PO BOX 188 MONCKS CORNER, SC 29461-0188	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.532	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1039	SANTILLAN, LETICIA ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 12/24/2017	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.533	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$62,418.36
s2088	SCHAFER AND WEINER, PLLC 40950 WOODWARD AVENUE, STE 100 BLOOMFIELD HILLS, MI 48304	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PROFESSIONALS	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.534	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,606.50
s2089	SCHMOYER REINHARD LLP 8000 IH 10 WEST SUITE 1600 SAN ANTONIO, TX 78230	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PROFESSIONALS	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.535	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,447.47
s2090	SCOTT WASTE SERVICES LLC PO BOX 660177 A WASTE CONNECTIONS COMPANY DALLAS, TX 75266-0177	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.536	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$221,098.14
s2091	SEATAC VILLAGE SHOPPING CENTER LLC PO BOX 4900 UNIT 80 PORTLAND, OR 97208	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.537	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$48,079.13
s2092	SELBY FAMILY TRUST AMENDED AND RESTATED 375 TIMBERCREEK CT RENO, NV 89511	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.538	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$4,798.88
s2093	SENN BROS PRODUCE INC 327 WHOLESALE LN WEST COLUMBIA, SC 29172	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: FOOD/BEVERAGE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.539	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$145,624.01
s2094	SERVE COMMERCIAL DIV TEPEC INC 29378 OAKMONT CT MURRIETA, CA 92563	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.540	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,199.89
s2095	SERVICE SPECIALISTS OF DANE CO INC 645 S BIRD STREET PO BOX 160 SUN PRAIRIE, WI 53590	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Amount of Claim

3.541	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$100.00
s2096	SERVICE WET GRINDING CO 1867 PROSPECT AVE CLEVELAND, OH 44115	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.542	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$4,451.42
s2097	SHASTA COUNTY, CALIFORNIA 1855 PLACER ST STE 201 ENVIRONMENTAL HEALTH DIVISION REDDING, CA 96001	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.543	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$151,223.37
s2098	SHAW MARKETPLACE PAK LLC PO BOX 9440 FRESNO, CA 93792	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.544	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,921.50
s2099	SHOES FOR CREWS INC PO BOX 734176 CHICAGO, IL 60673-4176	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Amount of Claim

3.545	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1082	SILVA TORRES,MIGUEL ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.546	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$4,309.20
s2100	SIMON ROOFING PO BOX 951109 CLEVELAND, OH 44193	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.547	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,681.75
s2101	SIRNA & SONS MAINLINE PRODUCE 7176 STATE RT 88 RAVENNA, OH 44266	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: FOOD/BEVERAGE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.548	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$739.00
s2102	SMC PLUMBING & DRAIN, INC. PO BOX 79200 CORONA, CA 92877	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Amount of Claim

3.549	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,757.33
s2103	SMITH FAMILY CLEANING LOREN SMITH PO BOX 43215 BROOKLYN PARK, MN 55443	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<hr/>			
3.550	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$977.50
s2104	SMITHPRINT 333 BURNET STREET SAN ANTONIO, TX 78202	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: MARKETING	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<hr/>			
3.551	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$13,315.87
s2105	SOCALGAS PO BOX C MONTEREY PARK, CA 91756-5111	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<hr/>			
3.552	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,505.00
s2106	SOLANO COUNTY, CALIFORNIA 675 TEXAS ST STE 5500 DEPT OF RESOURCE MGMT FAIRFIELD, CA 94533-6341	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<hr/>			

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Amount of Claim

3.553	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$217.32
s2107	SOUTH COAST AQMD 21865 COPLEY DR PO BOX 4943 DIAMOND BAR, CA 91765-0943	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.554	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$175.00
s2108	SOUTH PORTLAND, MAINE PO BOX 9422 OFFICE OF CITY CLERK SOUTH PORTLAND, ME 04116-9422	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.555	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$155,580.13
s2109	SOUTHERN CALIFORNIA EDISON PO BOX 300 ROSEMEAD, CA 91772-0001	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.556	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$74,901.01
s2110	SOUTHERN CALIFORNIA GAS COMPANY PO BOX C MONTEREY PARK, CA 91756-5111	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Amount of Claim

3.557	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,853.09
s2111	SOUTHERN SIGNS AND BANNERS PO BOX 444 1597 HWY 17 N LITTLE RIVER, SC 29566	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: MARKETING	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.558	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$225,377.58
s2112	SOUTHLAND MALL LP PO BOX 86 SDS 11-1150 MINNEAPOLIS, MN 55486-1150	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.559	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,071.32
s2113	SOUTHWEST GAS CORP PO BOX 24531 OAKLAND, CA 94623-1531	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.560	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$3,101.39
s2114	SPACENET INC PO BOX 843553 KANSAS CITY, MO 64184-3553	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.561	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1439	SPADA PROPERTIES INC ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred	Basis for the claim: LITIGATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.562	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$660.00
s2115	SPARTAN SERVICES INC 760 107TH ST S TACOMA, WA 98444	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.563	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$587,857.69
s2116	SPIRIT MASTER FUNDING VII LLC 6242 E 41ST SPIRIT REALTY CAPITAL LOCKBOX 2860 TULSA, OK 74135	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.564	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$979.80
s2117	SPRING VALLEY DAIRY PO BOX 20970 KEIZER, OR 97307-0970	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: FOOD/BEVERAGE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.565	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$10,980.09
s2118	SRP - STRATEGIC ENERGY MANAGER PO BOX 2950 PHOENIX, AZ 85062-2950	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.566	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$230.25
s2119	ST LOUIS COUNTY, MISSOURI 41 SOUTH CENTRAL AVE TREASURER DEPT PUBLIC WORKS CLAYTON, MO 63105	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.567	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$402.50
s2120	STAN THE HOT WATER MAN PO BOX 33157 PORTLAND, OR 97292-3157	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.568	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$4,164.27
s2122	STAN'S COMMERCIAL KITCHEN SERVICE, LLC 1298 CENTER RD NEWVILLE, PA 17241	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.569	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,177.00
s2121	STANLEY STEEMER CHARLESTON 520 16TH STREET DUNBAR, WV 25064	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.570	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$14,763.89
s2123	STATEWIDE SERVICE 603 MAIN AVE NITRO, WV 25143	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.571	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,100.00
s2124	STEAM SOURCE 3049 SALEM INDUSTRIAL DR WINSTON SALEM, NC 27127	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.572	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1060	STEIN,RENEE ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 8/24/2019	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.573	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$25,000.00
s1414	STEPHANIE DE LA CRUZ ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred	Basis for the claim: LITIGATION	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.574	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$4,237.50
s2125	STEPHANIE DE LA CRUZ ADDRESS REDACTED	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.575	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$925.00
s2126	STEVE'S CARPET CLEANING STEVE WYGLE 516 KOURT DR EUGENE, OR 97404	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.576	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,722.63
s2127	STOCKTON, CALIFORNIA 425 NORTH EL DORADO STREET FINANCE DIVISION STOCKTON, CA 95202	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.577	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,718.08
s2128	SUEZ WATER PENNSYLVANIA PO BOX 371804 PAYMENT CENTER PITTSBURGH, PA 15250-7804	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.578	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,685.02
s2129	SUMMERVILLE COMMISSIONERS OF PUBLIC WORKS PO BOX 817 SUMMERVILLE, SC 29484-0817	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.579	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$13,236.00
s2130	SUMMIT MECHANICAL DANIEL KLUS 6731 SE 82ND AVE UNIT 5 PORTLAND, OR 97266	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.580	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$100,000.00
s2626	SUSHI ZUSHI 2338 N LOOP 1604, STE 350 SAN ANTONIO, TX 78248	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred	Basis for the claim: RELATED PARTY	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.581	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1416	SUSHIE ANNETTE VALENZUELA ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred	Basis for the claim: LITIGATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.582	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$260.46
s2131	SWEETWATER AUTHORITY PO BOX 2328 CHULA VISTA, CA 91912-2328	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.583	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$66,965.50
s2132	SYSCO EASTERN MARYLAND 33300 PEACH ORCHARD RD POCOMOKE CITY, MD 21851	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: FOOD/BEVERAGE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.584	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$163,214.29
s2133	SYSCO KNOXVILLE LLC 900 TENNESSEE AVE KNOXVILLE, TN 37921	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: FOOD/BEVERAGE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.585	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$15,972.04
s2134	TACOMA PUBLIC UTILITIES PO BOX 11010 CITY TREASURER TACOMA, WA 98411-1010	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.586	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$798.00
s2135	TALON MAINTENANCE CONTRACTING INC M JEFF FREUDENBERGER 7024 BIRCHWOOD DR SLATINGTON, PA 18080	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.587	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,979.61
s2136	TAYLOR BOYS PRODUCE INC PO BOX 334 ENOREE, SC 29335-0334	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: FOOD/BEVERAGE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.588	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,980.53
s2137	TECH 24 C/O FIFTH THIRD BANK PO BOX 638959 CINCINNATI, OH 45263-8959	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: IT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.589	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1052	TEETER,GREGORY M ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 9/7/2018	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.590	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1048	TEGELER,SHANNON ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 1/1/2018	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.591	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$660.00
s2138	TENNESSEE STATE PO BOX 198990 DEPT OF AGRICULTURE NASHVILLE, TN 37219-8990	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: LICENSE/FEE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.592	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$290.75
s2139	THE GLASS GURU OF STOCKTON AND LODI 906 SCARLETWOOD CT GALT, CA 95632	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.593	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$465.85
s2140	THE LOCK SHOP 30819 PACIFIC HIGHWAY SOUTH FEDERAL WAY, WA 98003	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<hr/>			
3.594	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$535.00
s2141	THE PROZ 354 WILLIAMS HIGHWAY VIENNA, WV 26105	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<hr/>			
3.595	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$59,051.58
s2142	THE WASSERSTROM COMPANY PO BOX 182056 COLUMBUS, OH 43218-2056	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<hr/>			
3.596	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$5,690.22
s2143	THE WICHMAN COMPANY 7 N WESTWOOD AVE TOLEDO, OH 43607	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.597	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$4,827.66
s2144	THERMEX REFRIGERATION LLC 801 E PIKE ST CLARKSBURG, WV 26301	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.598	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$31,056.00
s2145	THF CLARKSBURG DEVELOPMENT ONE LLC 211 N STADIUM BLVD STE 201 C/O THF MANAGEMENT INC COLUMBIA, MO 65203	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.599	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$79,859.97
s2146	THF-D CHARLESTON DEVELOPMENT LLC 211 N STADIUM BLVD STE 201 C/O THF MANAGEMENT INC COLUMBIA, MO 65203	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.600	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$41,507.12
s2147	THOMPSON, CONNIE G PO BOX 6061 ATASCADERO, CA 93423	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.601	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$49,338.11
s2148	THOMPSON, NED M PO BOX 6061 ATASCADERO, CA 93423	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.602	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$6,674.82
s2149	TOLEDO EDISON COMPANY PO BOX 3687 AKRON, OH 44309-3687	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.603	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$3,230.13
s2150	TOLEDO, OHIO PO BOX 10017 DEPARTMENT OF PUBLIC UTILITIES - OHIO BUILDING TOLEDO, OH 43604	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.604	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$12,445.41
s2151	TOOR VILLAGE, LLC 27725 ROAD 92 VISALIA, CA 93277	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Amount of Claim

3.605	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,515.26
s2152	TORKE COFFEE PO BOX 694 SHEBOYGAN, WI 53082	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: FOOD/BEVERAGE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.606	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$53.00
s2153	TORRANCE, CALIFORNIA 3031 TORRANCE BLVD BUSINESS LICENSE TORRANCE, CA 90503	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.607	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$54.47
s2154	TOWN OF ANMOORE PO BOX 178 ANMOORE, WV 26323	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.608	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$11,047.98
s2155	TRI COUNTY ELECTRIC 3906 BROADWAY ST MOUNT VERNON, IL 62864-2224	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.609	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$46,243.87
s2156	TULARE COUNTY, CALIFORNIA 5957 SOUTH MOONEY BLVD ENVIRONMENTAL HEALTH VISALIA, CA 93277	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.610	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$14,731.01
s2157	TURLOCK IRRIGATION DISTRICT 333 EAST CANAL DR C/O DENNIS SWISHER TURLOCK, CA 95380	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.611	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$3,453.90
s2158	TWC SERVICES, INC. PO BOX 1612 DES MOINES, IA 50306-1612	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.612	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$16,297.58
s2159	TWO GUYS PLAZA LLC 44 SOUTH BAYLES AVENUE SUITE 210 PORT WASHINGTON, NY 11050	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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			Amount of Claim
3.613	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$160,000.00
s2627	TXFMP MANAGEMENT, LLC 2338 N LOOP 1604 SAN ANTONIO, TX 78248	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred	Basis for the claim: RELATED PARTY	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.614	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$844.52
s2160	TYCO SIMPLEXGRINNELL DEPT CH 10320 PALATINE, IL 60055-0320	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.615	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1402	TYERELL MACK ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred	Basis for the claim: LITIGATION	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.616	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$5,283.93
s2161	UGI UTILITIES INC PO BOX 15523 WILMINGTON, DE 19886-5523	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.617	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$600.00
s2162	ULLOA'S LANDSCAPE SERVICE JOHAN A ULLOA 6447 ALTON ST RIVERSIDE, CA 92509	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.618	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,524.10
s2163	UNITED REFRIGERATION & AIR CONDITIONING 511 E 19TH STREET BAKERSFIELD, CA 93305	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.619	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$5,208.36
s2164	UNITIL PO BOX 981077 BOSTON, MA 02298-1077	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.620	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$160,689.51
s2165	UPPER LAKES FOODS INC 801 INDUSTRY AVE CLOQUET, MN 55720	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: FOOD/BEVERAGE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.621	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$22,334.79
s2166	URBAN EDGE PROPERTIES LP PO BOX 645308 PITTSBURGH, PA 15264-5308	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.622	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$110,277.57
s2167	US FOODS INC PO BOX 281854 ATLANTA, GA 30384-1854	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: FOOD/BEVERAGE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.623	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,400,000.00
s1504	US TRUSTEE OFFICE OF THE UNITED STATES TRUSTEE 615 E HOUSTON STREET, SUITE 533 SAN ANTONIO, TX 78205	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred	Basis for the claim: JUDGEMENT ORDER	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.624	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1071	VALENZUELA,REINA ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 8/29/2018	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.625	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1083	VALENZUELA,REINA ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 12/3/2018	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.626	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1042	VALENZUELA,SUSIE ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 8/6/2019	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.627	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1084	VALENZUELA,SUSIE ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 10/19/2019	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.628	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1085	VALENZUELA,SUSIE ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 9/22/2019	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.629	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1086	VALENZUELA,SUSIE ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 6/15/2019	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.630	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	UNKNOWN
s1087	VALENZUELA,SUSIE ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred 1/1/2018	Basis for the claim: WORKERS COMPENSATION	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.631	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$212,633.86
s2168	VALLEY MALL LLC ADDRESS REDACTED	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.632	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,680.00
s2169	VALLEY ROOTER AND PLUMBING INC PO BOX 8156 ALTA LOMA, CA 91701	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.633	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$6,409.33
s2170	VANCOUVER PLAZA PO BOX 932400 CLEVELAND, OH 44193	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.634	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$40.00
s2171	VANCOUVER, WASHINGTON PO BOX 8995 FINANCIAL SERVICES VANCOUVER, WA 98668	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.635	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$3,131.04
s2172	VERIZON PO BOX 660108 DALLAS, TX 75266-0108	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.636	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,111.18
s2173	VERNIS & BOWLING OF PALM BEACH, P A 884 U S HIGHWAY ONE NORTH PALM BEACH, FL 33408	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PROFESSIONALS	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.637	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$140,390.44
s2174	VIEIRA, BATISTA S & DOLORES M 227 N SANTA CRUZ AVE STE B LOS GATOS, CA 95030-7206	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.638	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$134,394.19
s2175	VISALIA PROPERTY PARTNERSHIP RONALD B LABOWE PO BOX 26428 LOS ANGELES, CA 90026-0428	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.639	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$4,929.23
s2176	VISALIA, CALIFORNIA 315 E ACEQUIA AVE VISALIA, CA 93291	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.640	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$57,500.00
s2628	VITANOVA BRANDS, LLC 2338 N. LOOP 1604 W #350 SAN ANTONIO, TX 78248	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred	Basis for the claim: RELATED PARTY	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.641	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$296.00
s2177	VORTEX INDUSTRIES 1801 W OLYMPIC BLVD FILE 1095 PASADENA, CA 91199-1095	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.642	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$967.28
s2179	WARREN COUNTY WATER DISTRICT PO BOX 10180 BOWLING GREEN, KY 42102-4780	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.643	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$29,287.44
s2181	WARREN RURAL ELECTRIC COOPERATIVE CORP PO BOX 3200 HOPKINSVILLE, KY 42241-3200	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.644	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$4,217.01
s2182	WASHINGTON COUNTY, OREGON 155 NORTH FIRST AVE MS-5 HEALTH DEPT HILLSBORO, OR 97124-3072	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.645	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,246.59
s2183	WASHINGTON GAS PO BOX 9001036 LOUISVILLE, KY 40290-1036	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.646	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$60.00
s2184	WASHINGTON STATE PO BOX 9034 DEPT OF LICENSING OLYMPIA, WA 98507-9034	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PERMIT/FEE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.647	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$910.30
s2185	WASHINGTON WINDOW AND GLASS INC 5601 140TH AVE SW ROCHESTER, WA 98579	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.648	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$290,898.77
s2187	WASTE MANAGEMENT NATIONAL PO BOX 740023 ATLANTA, GA 30374-0023	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Amount of Claim

3.649	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$3,315.71
s2186	WASTE MANAGEMENT PO BOX 541065 ANTELOPE VALLEY LOS ANGELES, CA 90054-1065	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.650	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$409.11
s2188	WATER METRICS CO WEST 16120 SW 72ND AVE PORTLAND, OR 97224	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.651	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$12,283.23
s2189	WE ENERGIES PO BOX 90001 MILWAUKEE, WI 53290-0001	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.652	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$450.00
s2190	WEBBCO HOOD CLEANING & LAWCARE INC PO BOX 2166 CALLAHAN, FL 32011	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.653	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$3,934.32
s2191	WELLS FARGO VENDOR FINANCIAL SERVICES, LLC WELLS FARGO FINANCIAL LEASING INC PO BOX 931093 ATLANTA, GA 31193-1093	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.654	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$845.96
s2192	WESCO AIR 44 PLEASANT ST LEWISTON, ME 04240	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: REPAIRS & MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.655	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$8,061.01
s2193	WEST VIRGINIA AMERICAN WATER PO BOX 371880 PITTSBURGH, PA 15250-7880	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.656	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,550.20
s2194	WESTFIELD BANK FSB PO BOX 668 WESTFIELD CENTER, OH 44251-0668	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: INSURANCE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.657	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$205,333.34
s2195	WH GRIFFITH, TRUSTEE 5120 CAMPUS DRIVE SUITE 100 NEWPORT BEACH, CA 92660	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.658	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$245,619.40
s2196	WHITEMAK ASSOCIATES PO BOX 829432 PHILADELPHIA, PA 19182-9432	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.659	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$5,760.00
s2197	WINDELS MARX LANE & MITENBORF LLP 120 ALBANY STREET PLAZA TOWER 1 SUITE 600 NEW BRUNSWICK, NJ 08901	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: PROFESSIONALS	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.660	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,260.00
s2198	WISCONSIN LOGOS LLC 4918 TRIANGLE ST MCFARLAND, WI 53558	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: MARKETING	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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Amount of Claim

3.661	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$30.00
s2199	WOOD COUNTY, WISCONSIN PO BOX 8095 REGISTER OF DEEDS WISCONSIN RAPIDS, WI 54495-8095	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: LICENSE/FEE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.662	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$9,252.84
s2200	XCEL ENERGY PO BOX 9477 MINNEAPOLIS, MN 55484-9477	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: UTILITIES	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.663	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$164,241.46
s2201	YAM AND SUE LEE LIVING TRUST 4043 MARK TERRACE ATTN YAM LEE SAN DIEGO, CA 92117	Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: RENT	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.664	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$5,747.28
s2202	YESCO DELAWARE 459 OLD AIRPORT ROAD NEW CASTLE, DE 19720	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 2: All Creditors with NONPRIORITY Unsecured Claims

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			Amount of Claim
3.665	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,200.71
s2203	ZEPHYR SOLUTIONS INC 1050 LEAR INDUSTRIAL PKWY BLDG 1 AVON, OH 44011	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred Various	Basis for the claim: GENERAL & ADMINISTRATIVE	
	Last 4 digts of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Name

Case Number (if known)

Part 3:

List Others to Be Notified About Unsecured Claims

List in alphabetical order any others who must be notified for claims already listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address	On which line in Part 1 or Part 2 did you enter the related creditor?	Last 4 digits of account number for this entity
CARRINGTON, COLEMAN, SLOMAN & BLUMENTHAL, L.L.P. J. MICHAEL SUTHERLAND- TEXAS STATE BAR NO. 19524200 STEPHANIE F. ASS I- TEXAS STATE BAR NO. 24096737 901 MAIN ST., SUITE 5500 DALLAS, TX 75202	s2628	
VITANOVA BRANDS, LLC C/O CARRINGTON, COLEMAN, SLOMAN & BLUMENTHAL, L.L.P. MIKE SUTHERLAND 901 MAIN ST., STE. 5500 DALLAS, TX 75202	s2628	

Debtor Name

Case Number (if known)

Part 4:

Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

		Total of Claim Amounts
5a. Total Claims from Part 1	5a.	<div>\$2,397,507.00</div>
5b. Total Claims from Part 2	5b. +	<div><div>\$22,268,291.88</div><div>PLUS UNKNOWN</div></div>
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c.	<div><div>\$24,665,798.88</div><div>PLUS UNKNOWN</div></div>

Fill in this information to identify the case:Debtor name Buffets LLC (aka Ovation Brands)United States Bankruptcy Court for the: _____ District of _____
(State of)Case Number (if known): 21-30723-SGJ Chapter _____☐ Check if this is an amended filing**Official Form 206G****SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

- ☐ No. Check this box and file this form with the court with the debtor's other schedules.
- ☒ Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Assets - Real and Personal Property (Official Form 206A/B).

2. List all contracts and unexpired leases**State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2. 1	State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract	NATIONAL PRICING AGREEMENT 	ACADEMY FIRE LIFE SAFETY LLC 42 BROADWAY LYNBROOK, NY 11563
2. 2	State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract	CONTRACT EQUIPMENT AND INSTALLATION TJ 825 (SAN LUIS OBISPO, CA) 	ADT, LLC (PROTECTION ONE) PO BOX 872987 KANSAS CITY, MO 64187-2987
2. 3	State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract	CONTRACT ADDITIONAL PREMISES / EQUIPMENT / SERVICES RIDER - RYANS 2416 (CLARKSBURG, WV) 	ADT, LLC (PROTECTION ONE) PO BOX 872987 KANSAS CITY, MO 64187-2987
2. 4	State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract	CONTRACT ADDITIONAL PREMISES / EQUIPMENT / SERVICES RIDER - RYANS 2380 (GREENVILLE, TN - CLOSED) 	ADT, LLC (PROTECTION ONE) PO BOX 872987 KANSAS CITY, MO 64187-2987

Debtor Buffets LLC (aka Ovation Brands)

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Additional Page if Debtor Has More Executory Contracts or Unexpired Leases**List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2. 5	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT ADDITIONAL PREMISES / EQUIPMENT / SERVICES RIDER - RYANS 2118 (ROME, GA)</p>	<p>ADT, LLC (PROTECTION ONE) PO BOX 872987 KANSAS CITY, MO 64187-2987</p>
2. 6	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT ADDITIONAL PREMISES / EQUIPMENT / SERVICES RIDER - HTB 725 (MEDFORD, OR - CLOSED)</p>	<p>ADT, LLC (PROTECTION ONE) PO BOX 872987 KANSAS CITY, MO 64187-2987</p>
2. 7	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT ADDITIONAL PREMISES / EQUIPMENT / SERVICES RIDER - THJ 835 (CHINO, CA)</p>	<p>ADT, LLC (PROTECTION ONE) PO BOX 872987 KANSAS CITY, MO 64187-2987</p>
2. 8	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT ADDITIONAL PREMISES/ EQUIPMENT/SERVICES - SECURITY PHONE LINE CONVERSIONS</p>	<p>ADT, LLC (PROTECTION ONE) PO BOX 872987 KANSAS CITY, MO 64187-2987</p>
2. 9	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT WIRELESS SERVICES</p>	<p>AIRESPRING 1801 W OLYMPIC BLVD PASADENA, CA 91199-1422</p>
2. 10	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT NATIONAL SERVICES AGREEMENT - LINEN SUPPLY</p>	<p>AMERIPRIDE SERVICES, INC. (SUBCON: ARAMARK UNIFORM & CAREER APPAREL, LLC) PO BOX 249 BEMIDJI, MN 56619-0249</p>

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Additional Page if Debtor Has More Executory Contracts or Unexpired Leases**List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2. 11	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>PROPERTY LEASE OCB - BLDG 2513 MAIN STREET UNION GAP WA 98903</p>	<p>ARCDDBPPROP001 VEREIT TONIA JONES 2325 E CAMELBACK ROAD, 9TH FLOOR PHOENIX, AZ 85016</p>
2. 12	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>PROPERT LEASE OCB - BLDG 1325 NEW CHURCHMANS ROAD NEWARK DE 19713</p>	<p>ARCDDBPPROP001 VEREIT TONIA JONES 2325 E CAMELBACK ROAD, 9TH FLOOR PHOENIX, AZ 85016</p>
2. 13	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>PROPERTY LEASE HTB - BLDG 1431 SOUTH BRADLEY ROAD SANTA MARIA CA 93454</p>	<p>ARCDPPPPROP001 VEREIT DEBBIE HESTER - VP - ASSET MANAGEMENT 2325 E CAMELBACK ROAD, 9TH FLOOR PHOENIX, AZ 85016</p>
2. 14	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>PROPERTY LEASE HTB - BLDG 127 WEST VALLEY BOULEVARD RIALTO CA 92376</p>	<p>ARCDPPPPROP001 VEREIT DEBBIE HESTER - VP - ASSET MANAGEMENT 2325 E CAMELBACK ROAD, 9TH FLOOR PHOENIX, AZ 85016</p>
2. 15	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>PROPERTY LEASE HTB - BLDG 1850 W EMPIRE AVE BURBANK CA 91504</p>	<p>ARCDPPPPROP001 VEREIT TONIA JONES; DEBBIE HESTER - VP - ASSET MGMT 2325 E CAMELBACK ROAD, 9TH FLOOR PHOENIX, AZ 85016</p>
2. 16	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT BANK ACCOUNT AGREEMENT</p>	<p>ARIZONA BANK AND TRUST 1000 NORTH 54TH STREET CHANDLER, AZ 85226</p>

Debtor Buffets LLC (aka Ovation Brands)

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Additional Page if Debtor Has More Executory Contracts or Unexpired Leases**List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2. 17	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>PROPERTY LEASE OCB-BUFFALO-4401 TRANSIT RD, BUFFALO, NY 14221</p> <hr/> <p>State the term remaining</p> <hr/> <p>List the contract number of any government contract</p> <hr/>	<p>BENCHMARK-CLARENCE ASSOCIATES, LLC MICHELLE P HAGER TENANT OPERATIONS ASSISTANT 4053 MAPLE RD, SUITE 200 AMHERST, NY 14226</p>
2. 18	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>PROPERTY LEASE OCB 4401 TRANSIT RD BUFFALO NY 14221</p> <hr/> <p>State the term remaining</p> <hr/> <p>List the contract number of any government contract</p> <hr/>	<p>BENCHMARK-CLARENCE ASSOCIATES, LLC MICHELLE P HAGER TENANT OPERATIONS ASSISTANT 4053 MAPLE RD, SUITE 200 AMHERST, NY 14226</p>
2. 19	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>CONTRACT SERVICE AGREEMENT - SOFTWARE AND PROFESSIONAL SERVICES FOR EMPLOYEE BENEFIT ADMINISTRATION</p> <hr/> <p>State the term remaining</p> <hr/> <p>List the contract number of any government contract</p> <hr/>	<p>BENEFITFOCOUS.COM, INC. 100 BENEFITFOCUS WAY CHARLESTON, SC 29492</p>
2. 20	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>PROPERTY LEASE OCB 821 COUNTY ROUTE 64 ELMIRA NY 14903</p> <hr/> <p>State the term remaining</p> <hr/> <p>List the contract number of any government contract</p> <hr/>	<p>BIG FLATS CONSUMER SQUARE C/O DLC MANAGEMENT CORP BROOKE STEVENS, SENIOR LEASING REP 565 TAXTER ROAD, 4TH FLOOR ELMSFORD, NY 10523</p>
2. 21	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>PROPERTY LEASE HTB - GRD 1850 W EMPIRE AVE BURBANK CA 91504</p> <hr/> <p>State the term remaining</p> <hr/> <p>List the contract number of any government contract</p> <hr/>	<p>BURBANK EMPIRE CENTER, LLC C/O TIARNA REAL ESTATE SERVICES, INC 15250 VENTURA BLVD , SUITE 1010 SHERMAN OAKS, CA 91403</p>
2. 22	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>PROPERTY LEASE TJ 7006 NORTH CEDAR AVENUE FRESNO CA 93720</p> <hr/> <p>State the term remaining</p> <hr/> <p>List the contract number of any government contract</p> <hr/>	<p>CEDAR POINTE INVESTORS LP KRISSEY MCCULLICK 940 CALLE NEGOCIO STE 200 SAN CLEMENTE, CA 92673</p>

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2. 23	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>PROPERTY LEASE TJ 3801 PELANDALE AVE BUILDING D MODESTO CA 95356</p>	<p>CFT NORTHPOINTE, LLC TIANA C JENKINS, CHIEF OPERATING OFFICER CFT PROPERTIES 1767 GERMANO WAY PLEASANTON, CA 94566</p>
2. 24	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>PROPERTY LEASE OCB 14150 NICOLLET AVE BURNSVILLE MN 55337</p>	<p>COBBLESTONE PROPERTIES, LLC SR MANAGEMENT SERVICES, LLC 900 NORTH THIRD STREET MINNEAPOLIS, MN 55401</p>
2. 25	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>PROPERTY LEASE RYAN 1000 BREVARD RD ASHEVILLE NC 28806</p>	<p>COLE BU PORTFOLIO II, LLC VEREIT CARRIE DAVIS 2325 E CAMELBACK ROAD, 9TH FLOOR PHOENIX, AZ 85016</p>
2. 26	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>PROPERTY LEASE RYAN 243 STEVEN B TANGER BLVD COMMERCE GA 30529</p>	<p>COLE BU PORTFOLIO II, LLC VEREIT CARRIE DAVIS 2325 E CAMELBACK ROAD, 9TH FLOOR PHOENIX, AZ 85016</p>
2. 27	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>PROPERTY LEASE RYAN 2305 SHORTER AVE SW ROME GA 30165</p>	<p>COLE BU PORTFOLIO II, LLC VEREIT CARRIE DAVIS 2325 E CAMELBACK ROAD, 9TH FLOOR PHOENIX, AZ 85016</p>
2. 28	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT MASTER LICENSE AGREEMENT</p>	<p>CRUNCHTIME 8 NEW STREET BOSTON, MA 02128</p>

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2. 29	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>PROPERTY LEASE HTB 3520 W CARSON ST TORRANCE CA 90503</p>	<p>DEL AMO FASHION CENTER OPERATING CO, LLC SIMON PROPERTY GROUP ATTN: LEGAL/REAL ESTATE 225 WEST WASHINGTON STREET INDIANAPOLIS, IN 46204</p>
2. 30	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT CORPORATE DINING RESTAURANT AGREEMENT</p>	<p>DINOVA, INC. 6455 EAST JOHNS CROSSING STE200 JOHNS CREEK, GA 30097</p>
2. 31	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT STANDARD CLAIMS ADMINISTRATION AND NOTICING AGREEMENT</p>	<p>DONLIN, RECANO & COMPANY, INC. 6201 15TH AVENUE BROOKLYN, NY 11219</p>
2. 32	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT AFFILIATE AGREEMENT - PEST ELIMINATION SERVICES</p>	<p>ECOLAB, INC. 370 WASBASHA SAINT PAUL, MN 55102-2233</p>
2. 33	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT AFFILATE PARTICIPATION AGREEMENT FOR CLEANING PRODUCTS</p>	<p>ECOLAB, INC. 370 WASBASHA SAINT PAUL, MN 55102-2233</p>
2. 34	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT MERCHANT APP - CREDIT CARD</p>	<p>ELAVON 7300 CHAPMAN HIGHWAY KNOXVILLE, TN 37920</p>

Debtor Buffets LLC (aka Ovation Brands)

Case Number (if known): 21-30723-SGJ

Nam

Additional Page if Debtor Has More Executory Contracts or Unexpired Leases**List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2. 35	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT TEXAS ELECTRICITY MATRIX - UNDER 50 KW - RYANS 2474 (WAXAHACHIE, TX)</p>	<p>ENGIE RESOURCES, LLC PO BOX 9001025 LOUISVILLE, KY 40290-1025</p>
2. 36	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT MAINE ELECTRICITY - HTB 204 (SOUTH PORTLAND, ME)</p>	<p>ENGIE RESOURCES, LLC PO BOX 9001025 LOUISVILLE, KY 40290-1025</p>
2. 37	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT NEW YORK ELECTRICITY - FIXED PRICE - OCB 237 (ELMIRA, NY)</p>	<p>ENGIE RESOURCES, LLC PO BOX 9001025 LOUISVILLE, KY 40290-1025</p>
2. 38	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT OHIO ELECTRICITY - VARIABLE PRICE - RYANS 61 (TOLEDO, OH) AND RYANS 2441 (SANDUSKY, OH)</p>	<p>ENGIE RESOURCES, LLC PO BOX 9001025 LOUISVILLE, KY 40290-1025</p>
2. 39	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT ILLINOIS ELECTRICITY - OCB 73 (CHICAGO, IL)</p>	<p>ENGIE RESOURCES, LLC PO BOX 9001025 LOUISVILLE, KY 40290-1025</p>
2. 40	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>PROPERTY LEASE HTB 1315 GATEWAY BLVD FAIRFIELD CA 94533</p>	<p>FAIRFIELD GATEWAY, LP COURTNEY JONES PRINCIPAL CROSSPOINT REALTY SERVICES, INC. (10/2020) 20211 PATIO DRIVE, SUITE 145 CASTRO VALLEY, CA 94546</p>

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2. 41	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT BANK CARD MERCHANT AGREEMENT</p>	<p>FIFTH THIRD BANK (VANTIVE) 38 FOUNTAIN SQAURE PLAZA CINCINNATI, OH 45263</p>
2. 42	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT MARKETING</p>	<p>FISHBOWL INC. 44 CANAL CENTER PLAZA, SUITE #500 ALEXANDRIA, VA 22314-1563</p>
2. 43	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT SERVICE AGREEMENT</p>	<p>GRUBHUB HOLDINGS, INC. 5 BRYANT PARK, 15TH FLOOR NEW YORK, NY 10018</p>
2. 44	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT SERVICE AGREEMENT - 3RD PARTY DELIVERY PARTNERS</p>	<p>GRUBHUB HOLDINGS, INC. 5 BRYANT PARK, 15TH FLOOR NEW YORK, NY 10018</p>
2. 45	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT SERVICE AGREEMENT - 3RD PARTY DELIVERY PARTNERS</p>	<p>GRUBHUB HOLDINGS, INC. 5 BRYANT PARK, 15TH FLOOR NEW YORK, NY 10018</p>
2. 46	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT SERVICE AGREEMENT</p>	<p>GRUBHUB HOLDINGS, INC. 5 BRYANT PARK, 15TH FLOOR NEW YORK, NY 10018</p>

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Additional Page if Debtor Has More Executory Contracts or Unexpired Leases**List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2. 47	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT SERVICE AGREEMENT - 3RD PARTY DELIVERY PARTNERS</p>	<p>GRUBHUB HOLDINGS, INC. 5 BRYANT PARK, 15TH FLOOR NEW YORK, NY 10018</p>
2. 48	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT REAL ESATTE CONSULTING AND ADVISORY SERVICES AGREEMENT</p>	<p>HILCO REAL ESATTE, LLC 5 REVERE DRIVE SUITE 320 NORTHBROOK, IL 60062</p>
2. 49	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT NYC ELECTRIC TRANSACTION CONFIRMATION - OCB 138 (BUFFALO, NY)</p>	<p>HUDSON ENERGY SERVICES, LLC 105 DECKER CT SUITE 1050 IRVING, TX 75062</p>
2. 50	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>PROPERTY LEASE HTB 2900 DEERFIELD DR JANESVILLE WI 53546</p>	<p>INLAND COMMERCIAL PROPERTY MANAGEMENT INC. KEVIN FORREST, REGIONAL PROPERTY MANAGER 814 COMMERCE DRIVE, SUITE 300 OAK BROOK, IL 60523</p>
2. 51	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT SMARTER TAKEOUT SERVICE CONTRACT (ONLINE TAKEOUT)</p>	<p>IT PROBLEM SOLVER, INC, 27762 ANTONIO PKWY, STE L1-469 LADERA RANCH, CA 92694</p>
2. 52	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT CA NATURAL GAS (SOUTHERN CALIFORNIA GAS) - BULK CONTRACT</p>	<p>JUST ENERGY SOLUTIONS INC. PO BOX 101141 PASADENA, CA 91189-1141</p>

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2. 53	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>PROJECT PLAN AND AGREEMENT:</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>KENEXA, AN IBM COMPANY (CRUNCHTIME) PO BOX 827674 PHILADELPHIA, PA 19182-7674</p>
2. 54	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>PROPERTY LEASE OCB 5083 JONESTOWN ROAD HARRISBURG PA 17112</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>KIMCO OF PENNSYLVANIA TRUST JENNIFER L GORDON TENANT SALES COORDINATOR 1954 GREENSPRING DRIVE, SUITE 330 TIMONIUM, MD 21093</p>
2. 55	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>PROPERTY LEASE RYAN 1314 N MAIN STREET SUMMERVILLE SC 29483</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>LOUIS J DIMUZIO 196 CANTERING HILLS LANE SUMMERVILLE, SC 29483</p>
2. 56	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>PROPERTY LEASE HTB - GRD 127 WEST VALLEY BOULEVARD RIALTO CA 92376</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>MICHAEL AND SUE MURPHY MICHAEL AND SUE MURPHY 375 TIMBERCREEK CT RENO, NV 89511</p>
2. 57	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>PROPERTY LEASE TJ 1040 HELEN POWER DRIVE VACAVILLE CA 95687</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>MIDTOWN NATIONAL GROUP LP BLAKE PUTTKAMMER MIDTOWN NATIONAL GROUP 415 CEDROS, SUITE 215 SOLANA BEACH, CA 92075</p>
2. 58	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>MUSIC SERVICE</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>MUZAK, LLC DBA MOOD MEDIA ACTING AS AGENT FOR THE SERVICING MUSIC SUPPLIERS PO BOX 71070 CHARLOTTE, NC 28272-1070</p>

Debtor Buffets LLC (aka Ovation Brands)

Case Number (if known): 21-30723-SGJ

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Additional Page if Debtor Has More Executory Contracts or Unexpired Leases**List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2. 59	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT ALOHA POS - PROFESSIONAL SERVICES STATEMENT OF WORK</p>	<p>NCR CORPORATION PO BOX 198755 ATLANTA, GA 30384-8755</p>
2. 60	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT ALOHA POS - HOSPITALITY ADDENDUM</p>	<p>NCR CORPORATION PO BOX 198755 ATLANTA, GA 30384-8755</p>
2. 61	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT MASTER AGREEMENT- POS SYSTEM</p>	<p>NCR CORPORATION PO BOX 198755 ATLANTA, GA 30384-8755</p>
2. 62	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT AFFILIATE PARTICIPATION AGREEMENT FOR BULK CO2 GAS</p>	<p>NUCO2, LLC PO BOX 9011 STUART, FL 34995-9011</p>
2. 63	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>PROPERTY LEASE RYAN 3607 HWY 17 S NORTH MYRTLE BEACH SC 29582</p>	<p>PAT DESANTIS PO BOX 3377 FRESNO, CA 93650</p>
2. 64	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT GC SERVICE AGREEMENT (PARTIALLY EXECUTED)</p>	<p>PATRONIX SYSTEMS, INC. 80 BRIDGE STREET NEWTON, MA 02458</p>

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2. 65	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT LICENSE AGT FOR TRAINING PLATFORM</p>	<p>PLAYERLYNC, LLC 5690 DTC BLVD, SUITE 450E GREENWOOD VILLAGE, CO 80111</p>
2. 66	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>PROPERTY LEASE HTB 10542-A SE WASHINGTON ST PORTLAND OR 97216</p>	<p>PLAZA 205 GARP, LLC GERRITY GROUP, LLC 973 LOMAS SANTA FE, SUITE A SOLANA BEACH, CA 92075</p>
2. 67	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT ALARM</p>	<p>PROTECTION ONE 7255 CORPORATE CENTER DR , BUIDLING 2 BAY F MIAMI, FL 33126</p>
2. 68	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT SERVICE AGREEMENT</p>	<p>PUNCHH INC. 1875 S. GRANT ST, SUITE 810 SAN MATEO, CA 94402</p>
2. 69	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>PROPERTY LEASE HTB - GRD 127 WEST VALLEY BOULEVARD RIALTO CA 92376</p>	<p>ROBERTA A BOWMAN DUANE BOWMAN 2110 BURR CT SANTA CRUZ, CA 95062</p>
2. 70	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT PURCHASE AGREEMENT</p>	<p>ROYAL CUP, INC. 160 CLEAGE DRIVE BIRMINGHAM, AL 35217</p>

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2. 71	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>PROPERTY LEASE HTB 651 PALOMAR STREET CHULA VISTA CA 91911</p>	<p>SC PALOMAR RETAIL CENTER AND EC PALOMAR RETAIL CENTER, LLC ATTN: BRIAN CREPEAU, SALES & LEASING/VP OF MGMT 10721 TREENA ST., SUITE 200, SAN DIEGO, CA 92131</p>
2. 72	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT COMMERCIAL GAS SUPPLY AGREEMENT - CAA (THJ)</p>	<p>SFE CALIFORNIA ADDRESS UNAVAILABLE AT TIME OF FILING</p>
2. 73	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT COMMERCIAL GAS SUPPLY AGREEMENT - CAA (HTB)</p>	<p>SFE CALIFORNIA ADDRESS UNAVAILABLE AT TIME OF FILING</p>
2. 74	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>PROPERTY LEASE TJ 485 MADONNA ROAD SAN LUIS OBISPO CA 93405</p>	<p>SLO PROMENADE DE, LLC TKG MANAGEMENT, INC KELLY J JOHNSON 211 N STADIUM BLVD, SUITE 201 COLUMBIA, MO 65203</p>
2. 75	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT DISTRIBUTION AGREEMENT</p>	<p>SYSCO CORPORATION ADDRESS UNAVAILABLE AT TIME OF FILING</p>
2. 76	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>AFFILIATE PARTICIPATION AGREEMENT FOR THE SMALL WARE</p>	<p>THE WASSERSTROM COMPANY PO BOX 182056 COLUMBUS, OH 43218</p>

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2. 77	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>PROPERTY LEASE TJ 4015 W CALDWELL VISALIA CA 93277</p>	<p>TOOR VILLAGE, LLC ARUNJOAT TOOR TOOR CAPITAL 27725 ROAD 92 VISALIA, CA 93277</p>
2. 78	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>MANAGEMENT AGREEMENT</p>	<p>TXFMP MANAGEMENT, LLC 2338 N LOOP 1604 SAN ANTONIO, TX 78248</p>
2. 79	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>MANAGEMENT AGREEMENT</p>	<p>VITANOVA BRANDS, LLC 2338 N. LOOP 1604 W #350 SAN ANTONIO, TX 78248</p>
2. 80	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT MASTER SERVICES AGREEMENT - WASTE AND RECYCLING SERVICES</p>	<p>WASTE MANAGEMENT NATIONAL SERVICES, INC. PO BOX 740023 ATLANTA, GA 30374-0023</p>
2. 81	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT MASTER SERVICE AGREEMENT</p>	<p>WHERE 2 GET IT, INC BRANDIFY 222 S HARBOR BLVD, STE 600 ANAHEIM, CA 92805</p>
2. 82	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONTRACT FIRST AMENDMENT - TRADEMARK LICENSE AGREEMENT - COUNTRY BUFFET, HOMETOWN BUFFET, OLD COUNTRY BUFFET</p>	<p>ZENRIN USA, INC. 1350 BAYSHORE HIGHWAY, SUITE 580 BURLINGAME, CA 94010</p>

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Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2. 83	State what the contract or lease is for and the nature of the debtor's interest	CONTRACT MASTER SERVICE AGREEMENT	ZUPPLER ONL FOOD ORDERING LLC 2014 MALLARD CIRCLE PHOENIXVILLE, PA 19460
	State the term remaining		
	List the contract number of any government contract		

Fill in this information to identify the case:Debtor name **Buffets LLC**United States Bankruptcy Court for the: **NORTHERN DISTRICT OF TEXAS - DALLAS DIVISION**Case number (if known) **21-30723**☐ Check if this is an amended filing**Official Form 206H
Schedule H: Your Codebtors****12/15****Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.****1. Do you have any codebtors?**☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.☒ Yes**2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.***Column 1: Codebtor**Column 2: Creditor***Name****Mailing Address****Name***Check all schedules that apply:***2.1 All jointly administered Debtors****2338 N. Loop 1604 W. Ste 350
San Antonio, TX 78248****Vitanova Brands, LLC**☒ D **2.2**
☐ E/F _____
☐ G _____**2.2 Fire Mountain Restaurants, LLC****2338 N. Loop 1604 W. Ste 350
San Antonio, TX 78248****Unsecured Creditors Trustee**☒ D **2.1**
☐ E/F _____
☐ G _____**2.3 Hometown Buffet, Inc.****2338 N. Loop 1604 W. Ste 350
San Antonio, TX 78248****Unsecured Creditors Trustee**☒ D **2.1**
☐ E/F _____
☐ G _____**2.4 OCB Purchasing, Co.****2338 N. Loop 1604 W. Ste 350
San Antonio, TX 78248****Unsecured Creditors Trustee**☒ D **2.1**
☐ E/F _____
☐ G _____**2.5 OCB Restaurant Company, LLC****2338 N. Loop 1604 W. Ste 350
San Antonio, TX 78248****Unsecured Creditors Trustee**☒ D **2.1**
☐ E/F _____
☐ G _____

Debtor **Buffets LLC**Case number (if known) **21-30723****Additional Page to List More Codebtors**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.6	Ryan's Restaurant Group, LLC	2338 N. Loop 1604 W. Ste 350 Atascosa, TX 78002-4000	Unsecured Creditors Trustee	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.7	Tahoe Joe's, Inc.	2338 N. Loop 1604 W. Ste 350 San Antonio, TX 78248	Unsecured Creditors Trustee	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.8	Fire Mountain Restaurants, LLC	2338 N. Loop 1604 W. Ste 350 San Antonio, TX 78248	Cole Bu Portfolio II, LLC	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.9</u>
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2.9	Fire Mountain Restaurants, LLC	2338 N. Loop 1604 W. Ste 350 San Antonio, TX 78248	Cole Bu Portfolio II, LLC	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.10</u>
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2.10	Fire Mountain Restaurants, LLC	2338 N. Loop 1604 W. Ste 350 San Antonio, TX 78248	Cole Bu Portfolio II, LLC	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.11</u>
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2.11	Fire Mountain Restaurants, LLC	2338 N. Loop 1604 W. Ste 350 San Antonio, TX 78248	Pat Desantis	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.18</u>
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2.12	Fire Mountain Restaurants, LLC	2338 N. Loop 1604 W. Ste 350 San Antonio, TX 78248	Louis J Dimuzio	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.16</u>
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2.13	Hometown Buffet, Inc.	2338 N. Loop 1604 W. Ste 350 San Antonio, TX 78248	Arcdbpprop001	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.1</u>
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Debtor **Buffets LLC**Case number (if known) **21-30723****Additional Page to List More Codebtors**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.14	Hometown Buffet, Inc.	2338 N. Loop 1604 W. Ste 350 San Antonio, TX 78248	Arcdppprop001	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.3</u>
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2.15	Hometown Buffet, Inc.	2338 N. Loop 1604 W. Ste 350 San Antonio, TX 78248	Arcdppprop001	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.4</u>
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2.16	Hometown Buffet, Inc.	2338 N. Loop 1604 W. Ste 350 San Antonio, TX 78248	Roberta A. Bowman	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.20</u>
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2.17	Hometown Buffet, Inc.	2338 N. Loop 1604 W. Ste 350 San Antonio, TX 78248	Michael And Sue Murphy	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.17</u>
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2.18	OCB Restaurant Company, LLC	2338 N. Loop 1604 W. Ste 350 San Antonio, TX 78248	Plaza 205 Garp, LLC	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.19</u>
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2.19	OCB Restaurant Company, LLC	2338 N. Loop 1604 W. Ste 350 San Antonio, TX 78248	Fairfield Gateway, LP	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.13</u>
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2.20	OCB Restaurant Company, LLC	2338 N. Loop 1604 W. Ste 350 San Antonio, TX 78248	Arcdppprop001	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.5</u>
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2.21	OCB Restaurant Company, LLC	2338 N. Loop 1604 W. Ste 350 San Antonio, TX 78248	Arcdbppprop001	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.2</u>
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Debtor **Buffets LLC**Case number (if known) **21-30723****Additional Page to List More Codebtors**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.22	OCB Restaurant Company, LLC	2338 N. Loop 1604 W. Ste 350 San Antonio, TX 78248	Burbank Empre Center, LLC	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.8</u>
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2.23	OCB Restaurant Company, LLC	2338 N. Loop 1604 W. Ste 350 San Antonio, TX 78248	Inland Commercial Property Management In	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.14</u>
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2.24	OCB Restaurant Company, LLC	2338 N. Loop 1604 W. Ste 350 San Antonio, TX 78248	Del Amo Fashion Center Operating Co, LLC	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.12</u>
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2.25	OCB Restaurant Company, LLC	2338 N. Loop 1604 W. Ste 350 San Antonio, TX 78248	Benchmark-Clarence Associates, LLC	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.6</u>
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2.26	OCB Restaurant Company, LLC	2338 N. Loop 1604 W. Ste 350 San Antonio, TX 78248	Kimco Of Pennsylvania Trust	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.15</u>
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2.27	OCB Restaurant Company, LLC	2338 N. Loop 1604 W. Ste 350 San Antonio, TX 78248	Big Flats Consumer Square	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.7</u>
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Fill in this information to identify the case and this filing:

Debtor Name Buffets LLC

United States Bankruptcy Court for the: Northern District of Texas
(State)

Case number (If known): 21-30723 (SGJ)

Official Form 202**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule _____
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 05/26/2021
MM / DD / YYYY

X/s/ Mark Shapiro

Signature of individual signing on behalf of debtor

Mark Shapiro

Printed name

Chief Restructuring Officer

Position or relationship to debtor